



CONTRACTOR'S DATA SHEET
CITY OF WAUSAU REHABILITATION PROGRAMS
(please complete front and back)

Note: Use additional pages where necessary

Company Name: _____

Business Address: _____

Phone No: _____ Fax No: _____ Cell No: _____

Names and addresses of all owners, partners, and if a corporation, the names of major stockholders and/or officers:

Is your Business owned (51% or more) by a Female? _____

Please circle the most appropriate choice that best describes your Contractor Business Racial/Ethnic Code:

- | | | |
|----------------------|---------------------------|--------------------|
| 1. White American | 2. Black American | 3. Native American |
| 4. Hispanic American | 5. Asian/Pacific American | 6. Hasidic Jews |

Years in Business: _____ Please note what type of construction work your firm performs in detail:

Other cities in which your firm or principals have operated: _____

Business References: (Include local banks with whom you do or have done business, including those who finance your work): _____

List of material suppliers: _____

Names, addresses and phone numbers of at least three recent customers who have had home improvement work done by your firm: (Please be sure to have correct phone numbers)

- | | | | |
|----|-------|---------|-------|
| 1. | _____ | | |
| | Name | Address | Phone |
| 2. | _____ | | |
| | Name | Address | Phone |
| 3. | _____ | | |
| | Name | Address | Phone |

THE UNDERSIGNED CONTRACTOR CERTIFIES that all information given herein is substantially correct and further agrees:

1. That the work will be performed in accordance with standards set forth by the Community Development Department subject to a final inspection by the designated inspector(s).

2. That if work is performed by the contractor is found to be unsatisfactory by the Community Development Department or City Inspectors or if the contract relations between the contractor, homeowner or other parties are found to be unsatisfactory, that the Community Development Department may remove the contractor's name from the approved list, with such accompanying publicity as it deems necessary.
3. That adequate insurance and Worker's Compensation will be provided for each job under each Rehabilitation Loan Program.
4. That he/she will abide by U.S. Department of Housing and Urban Development regulations pertaining to equal employment opportunity and fair housing standards.
5. That all work will be done in conformance with all applicable City codes and zoning regulations.
6. That all work will be guaranteed for at least one year after the project completion period.
7. That the contractor will maintain and provide a certificate of insurance to the City of Wausau on an annual basis.
8. That the contractor will maintain and provide proof of State of Wisconsin Contractor's License and Lead Paint certifications as required by each individual project.
9. That the contractor will complete and return the Section 3 Qualification Form as requested by Community Development Department.

Date: _____

Signed: _____

Reviewed on: _____

Signed: _____