

**CITY OF PULLMAN
SMALL WORKS ROSTER REGISTRATION FORM**

CONTRACTOR NAME _____

MAILING ADDRESS _____

E-MAIL ADDRESS _____

PHONE NUMBER _____ FAX NUMBER _____

WASHINGTON STATE CONTRACTOR'S LICENSE NO _____

If an attempt is made to contact you using the above information and the mail is returned or the number is invalid, you will be removed from the roster. It is not necessary to reapply yearly for the roster. Once you are included on the roster you will remain on it indefinitely unless your contact information becomes invalid.

This firm can perform the following types of work for the City of Pullman: (check all applicable trades and note the years of experience for each)

<u>Type of Work</u>	<u>Years of Experience</u>	<u>Type of Work</u>	<u>Years of Experience</u>
<input type="checkbox"/> Asphalt Paving	_____	<input type="checkbox"/> Electrical Work	_____
<input type="checkbox"/> Building Construction	_____	<input type="checkbox"/> Fencing	_____
<input type="checkbox"/> Building Remodeling	_____	<input type="checkbox"/> Landscaping	_____
<input type="checkbox"/> Concrete Work	_____	<input type="checkbox"/> Sewer Main Construction	_____
<input type="checkbox"/> Earthwork	_____	<input type="checkbox"/> Water Main Construction	_____

Other Specialties (specify) _____

Other Technical Qualifications _____

Are you able to provide performance and payment bonds for contracting purposes? Yes No

Bond Limit \$ _____

Contractor's Authorized Representative:

Signature _____ Date: _____

Typed or Printed Name _____

Title _____

Please Return This Form To:

City of Pullman
Public Works, Engineering Division
190 SE Crestview Street, Building A
Pullman, WA 99163
pwcd-admin@pullman-wa.gov