

**CITY OF COLUMBIA
HOUSING REHABILITATION PROGRAMS
CONTRACTOR APPLICATION**

Date _____

Please furnish all information requested below. This information is confidential and will be kept in our files. Our office will use such information only to verify the qualifications of contractor on home improvement contracts.

A. COMPANY NAME: _____
CONTACT PERSON: _____
BUS. ADDRESS: _____ BUS. PHONE _____
E-MAIL ADDRESS: _____ FAX # _____
MOBILE # _____ SS# or Fed. Tax ID# _____

B. TYPE OF BUSINESS:
 Sole Proprietary Partnership LLC (Limited Liability Company)
 S-Corporation Corporation Women-owned Minority-owned

C. RACE: WHITE _____ AFRICAN-AMERICAN _____ OTHER: _____
HISPANIC: _____ YES _____ NO

D. LIST THE NAMES AND ADDRESSES OF THE LAST THREE CLIENTS FOR WHOM YOU HAVE COMPLETED CONSTRUCTION.

NAME	ADDRESS	CITY	PHONE

E. LIST TWO MAJOR SUPPLIERS FROM WHOM YOU PURCHASE MOST OF YOUR SUPPLIES.

NAME	ADDRESS	CITY	PHONE

F. LIST TWO FINANCIAL INSTITUTIONS (BANKS, SAVINGS AND LOAN ASSOCIATIONS, ETC.) WITH WHOM YOU HAVE ESTABLISHED CREDIT.

NAME	ADDRESS	CITY	PHONE

CONTRACTOR APPLICATION FORM CONT'D

- G. HOW LONG HAVE YOU BEEN IN THE CONTRACTING BUSINESS? _____
- H. APPROXIMATELY HOW MANY JOBS HAVE YOU COMPLETED AS A GENERAL CONTRACTOR?

- I. DESCRIBE YOUR SMALLEST AND LARGEST CONSTRUCTION JOBS: _____

- J. HOW MANY EMPLOYEES DO YOU EMPLOY FULL-TIME? _____
DO YOU EMPLOY A JOB FOREMAN? _____ YES _____ NO
- K. HAVE YOU EVER WORKED WITH FEDERALLY FUNDED PROJECTS? _____ YES _____ NO
- L. ARE YOU A SECTION 3 BUSINESS? (Definition, Survey attached) _____ YES _____ NO
- M. ARE YOU LICENSED AS A GENERAL CONTRACTOR IN THE CITY OF COLUMBIA ?
_____ YES _____ NO
- N. ARE YOU LICENSED IN ANY OTHER TRADES? IF YES, CIRCLE ALL THAT APPLY:
Mechanical Electrical Plumbing Asbestos Lead Abatement
- O. DO YOU HAVE CONTRACTOR'S LIABILITY INSURANCE? _____ YES _____ NO
DO YOU HAVE WORKER'S COMPENSATION? _____ YES _____ NO
- P. HAVE YOU EVER BID A JOB THAT REQUIRED BONDING? _____ YES _____ NO
IF YES, WHAT IS THE LARGEST AMOUNT YOU HAVE BEEN BONDED FOR? _____
- Q. HAVE YOU EVER HAD A CLIENT FILE SUIT DUE TO A JOB RELATED ISSUE?
_____ YES _____ NO
IF YES, EXPLAIN: _____

ATTACH COPIES OF THE FOLLOWING TO YOUR APPLICATION FORM:

- R. **CERTIFICATE OF INSURANCE (INCLUDING WORKERS COMPENSATION COVERAGE)**
- S. **CITY OF COLUMBIA BUSINESS LICENSE**
- T. **CITY OF COLUMBIA LICENSE FOR ANY APPLICABLE SPECIALTY AREAS (MECHANICAL, ELECTRICAL, PLUMBING)**

YOUR APPLICATION WILL NOT BE PROCESSED UNTIL ALL APPLICABLE INFORMATION IS PROVIDED

Contractor and Subcontractor Section 3 Survey

(1) Please list any Section 3 residents employed by your company (see attached definition of "Section 3 Residents"). _____

(2) Does your company qualify as a Section 3 business? If yes, please attach an explanation. (See attached definition of "Section 3 Businesses"). _____

(3) Do you have any Section 3 employees who reside in the project service area. (See attached map). _____

(4) Will your company be creating any job opportunities as a result of this contract? If yes, please describe these positions for our records and then contact The City of Columbia, Department of Planning and Development at (573) 874-7239. _____

	Total Number of New Hires	Number of New Hires that are Section 3 Residents	% of Aggregate New Hires that are Section 3 Residents	% of total staff hours for Section 3 Employees* and Trainees	Number of Section 3 Employees* and Trainees
Technicians					
Construction Trades Trade:					
Trade:					
Trade:					
Trade:					
Trade:					
Trade:					
Trade:					
Trade:					
Trade:					

*A Section 3 Employee is one who has been employed by the company for less than three years and was a low income resident of the Columbia metropolitan area prior to employment

SUBMITTED BY: _____
Company Name (Please type or print)

Signature

Name & Title (Please type or print)

Section 3 Businesses

Definition:

A Section 3 business is a business located within Boone or Howard Counties that meets one of the following criteria:

1. The business is 51% or more owned by Section 3 residents; or
2. their permanent, full-time employees* include persons at least 30% of whom are currently Section 3 residents, or within three (3) years of the date of first employment with the business concern were Section 3 residents; or
3. they hire HUD Youthbuild (Job Point, Columbia Builds Youth) in the city of Columbia in which Section 3 covered assistance is expended.
4. they provide evidence of a commitment to subcontract in excess of 25% of the dollar award of all subcontracts to be awarded to business concerns that meet the qualifications set forth in #1, 2, or 3 above.

Income Limits for Section 3 (total gross household income)

1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
\$37,000	\$42,250	\$47,550	52,800	\$57,050	\$61,250	\$65,500	\$69,700

*A Section 3 Employee is one who has been employed by the company for less than 3 years and was a low income resident of Boone or Howard Counties *prior to employment*.



If you have any questions, please call 573-874-7239.