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**PRE-QUALIFICATION APPLICATION FOR CONTRACTORS TO  
PARTICIPATE IN FEDERALLY-FUNDED REHABILITATION PROJECTS**

The City of Mobile is seeking to pre-qualify individuals or entities interested in performing Rehabilitation Work on grant and loan-funded property rehabilitation projects.

Do you have the following? If yes, please copy and return the documents along with this application.

1. a City of Mobile **business license**;  Yes  No
2. a copy of the attached **surety bond certificate**;  Yes  No
3. a **commercial liability** (automobile and general) **insurance certificate**;  Yes  No
4. a “**Lead Safe Work Certificate**”;  Yes  No
5. a State of Alabama **Homebuilder’s license**;  Yes  No
6. OR applicable **mechanical, electrical** and/or **plumbing licenses**.  Yes  No
7. a copy of Commercial **Workmans’ Compensation** insurance certificate  Yes  No

Are you willing to work on historic (properties greater than 50 years old) properties?  Yes  No

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Additionally, all applicants must complete the form below:

**Date:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

**Business Name:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**Business Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Cell:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Hours of Operation:** \_\_\_\_\_

**Description of Services:** \_\_\_\_\_

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**Please provide Names, Addresses, and Years of Construction Experience of all Owners, Partners, and Stock holders.** (Use an additional sheet if necessary)

Name: \_\_\_\_\_ Years: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Years: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Years: \_\_\_\_\_

Address: \_\_\_\_\_

List other contracting firm names under which the principals have operated, with former addresses and cities.

\_\_\_\_\_  
\_\_\_\_\_

**References with Names and Addresses**

Banks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Materials Dealers: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**List three recent customers for which you have performed work within the last twelve months:**

1. \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

2. \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

3. \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

The undersigned contracting firm agrees that in consideration for being placed upon the *Pre-Qualified Contractors Register* s/he will comply with the following conditions on all rehabilitation work performed on grant or loan-funded properties, regardless of whether federal financing is or is not used by the owner.

1. To use only contract forms previously approved by the City of Mobile;
2. To perform all Work in accordance with applicable building ordinances of the City of Mobile and approved by the Architectural Review Board if property is within a historic district;
3. If the Work performed by the Contractor is found to be unsatisfactory or noncompliant with the Work specifications, the City of Mobile may remove the contractor's name from the "Pre-Qualified Contractors Register";

**\* Please Note: Any "debarred" contractors and/or contractors who have previously performed unsatisfactory Work for either the City of Mobile or the Mobile Housing Board's housing rehabilitation programs will NOT be added to the *Pre-Qualified Contractors Register*.**

Applicant hereby certifies that all the information given above is complete, factual, and that no unfavorable information has been withheld.

Signed on this the \_\_\_\_ day of \_\_\_\_\_, 201\_\_, by \_\_\_\_\_,  
(Signature)

\_\_\_\_\_, on behalf of \_\_\_\_\_.  
(Title) (Firm)

**Please return the completed form and all necessary documentation to:**

Karen Hansberry  
City of Mobile  
Community Planning and Development Department  
205 Government Street  
5<sup>th</sup> Floor, Suite 508  
Mobile, AL 36602  
(251) 208-6290