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

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: ____________________________________________________________
Please provide Names, Addresses, and Years of Construction Experience of all Owners, Partners, and Stockholders. (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
5th Floor, Suite 508
Mobile, AL 36602
(251) 208-6290