Contractors wishing to make application to Public Utility District No. I of Okanogan County, Washington ("the District") for designation as a contractor on the District's Small Works Roster as authorized by RCW 54.04.070 shall complete the following questionnaire and submit it to the District, attention: Purchasing Agent.

Please note that, as required by RCW 54.04.070, the District's Small Works Roster is revised each year. Accordingly, each contractor who wishes to remain on the current Small Works Roster must complete and submit this prequalification form on an annual basis.

**APPLICATION FOR PREQUALIFICATION**

1. Name of Applicant ________________________

2. Address of Applicant ________________________
   a. Mailing _________________________
   b. Business __________________________
   c. Telephone ________________________
   d. Applicant's contractor registration # ________________________
      (RCW 18.27; RCW 39.06)

3.A. If applicant is a corporation, state:
   a. State of incorporation ________________________
   b. Name and address of registered agent ________________________
   c. Names, titles and addresses of officers of the corporation and their length of time with corporation. Indicate by an * those authorized to sign contracts. (Use additional sheet if necessary.)

   d. Number of years corporation has been in business ________________________

3.B. If applicant is a partnership, state:
   a. Names and addresses of all partners ________________________

   b. ________________________

   c. ________________________

   d. ________________________
b. Length of time partnership has been in business _______________________

c. If applicant is a sole proprietorship, how long have you been in business?

4. Has the applicant paid all current license fees to the State of Washington?

5. For which of the following classes of work is applicant seeking prequalification? (Indicate by use of an “X” in proper blank.) For each class which you mark with an “X”, list the years within the past three years during which applicant performed work of that type and for whom applicant performed it.

A. Excavation Services
   a. Excavation __________________________
   __________________________
   __________________________

   b. Backfilling __________________________
   __________________________

   c. Hauling __________________________
   __________________________

   d. Grading __________________________
   __________________________

B. Construction
   a. General Contractor-New Construction Building __________________________
   __________________________

   __________________________
PUD No. 1 of Okanogan County

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<tr>
<th>Work Type</th>
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<tr>
<td>b. General Contractor-Remodel Building</td>
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<td>c. Concrete Work</td>
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<td>d. Masonry Work</td>
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<td>e. Carpentry Work</td>
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<td>f. Interior Finish Work</td>
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<td>g. Structural Steel Work</td>
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<td>h. Roofing Construction and/or Repair</td>
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<tr>
<td>i. Asphalt Paving</td>
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</table>
C. Electrical
   a. Wire/Cable Installation -- aboveground

   -- underground

b. Electrical Switch Gear & Control Installation

c. Switchyard Construction Work

D. Mechanical Construction
   a. Plumbing and Piping

   b. HVAC

   c. Structural Steel Installation
## SMALL WORKS ROSTER APPLICATION

PUD No. 1 of Okanogan County

### E. Maintenance

a. Janitorial

b. Safety Inspection, & Lifts

### F. Miscellaneous (list any special class not covered above)

6. List any recent changes in applicant's organization, personnel, ownership or otherwise which might render applicant's past record of performance an inaccurate predictor of applicant's ability to perform for the District:

7. List applicant's technical qualifications to perform the work for which applicant seeks prequalification:

8. State whether applicant has any existing commitments or limitations which will interfere with its complying with the required performance schedule of any potential contracts with the District (for applications not submitted for a specific contract enter "no contract at this time"): 
9. If applicant has a comprehensive general liability policy insuring its business activities, state the liability limits of that policy:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

10. What is the maximum amount of work, expressed in dollars, for which applicant can secure bonding and which applicant is capable of undertaking: $______________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

11. List the name and address of applicant’s bank, including the branch, phone number and name of the individual at the bank to be contacted for a financial reference:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

12. Provide the names, phone numbers and addresses of three clients whom the District can contact as references:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

13. Affirm that applicant will comply with RCW 39.12 “Prevailing Wages on Public Works” and WAC 296-1 27 “Prevailing Wage”. (State “so affirmed”): __________________________

14. Affirm that applicant will comply with all applicable government regulations regarding nondiscrimination in employment practices on the basis of sex, race, color or national origin. (State “so affirmed”): __________________________
15. Affirm that applicant recognizes that RCW 54.04.085 authorizes the District to reconsider or redetermine the prequalification status of applicant at any time or for any reason at the sole judgment of the District. (State “so affirmed”): ________________

16. Affirm that applicant has read the general conditions which will constitute a part of the Small Works Roster Contract and agrees that, unless modified by conditions applicable to the specific job upon which it provides a quote, it will be bound by these conditions for all jobs which it awarded on this Small Works Roster. (State “so affirmed”): _______

THE FOLLOWING ATTACHMENTS MUST ACCOMPANY THIS APPLICATION TO BECOME PREQUALIFIED

17. For those clients listed in answer to question No. 5, attach a list which contains their names, addresses, location of the jobs performed and contract amounts of the larger contracts.

18. Attach a copy of applicant’s contractor license or other evidence that applicant is a registered contractor (RCW 18.27).

SUBMITTED this ____ day of ________________, ______.

________________________________________
Name of Company

________________________________________
Name of Applicant

________________________________________
Title of Applicant
State of Washington

COUNTY OF ___________________________

I certify that I know or have satisfactory evidence that ____________________ is the person who appeared before me and said person acknowledged that he/she signed this instrument, on oath stated that he/she was authorized to execute the instrument and acknowledged it as the __________ of __________________________ to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated this __ day of __________, ________.

______________________________
(Printed name)

Notary Public in and for the State of Washington, residing in ____________________
My appointment expires ____________________