

FREELAND WATER and SEWER DISTRICT
PO BOX 222
FREELAND WASHINGTON 98249
PHONE: 360-331-5566
FAX: 360-579-2058
E-mail: info@freelandwsd.com

To be placed on the Small Works Roster of the Freeland Water and Sewer District, the following application must be completed. Incomplete applications will not be accepted.

Date of Registration/Application: _____

1. Name of Applicant/Registrant: _____

2. Name of Company: _____

3. Business Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____ E-mail: _____

4. Check appropriate: Incorp: _____ Prtnrshp: _____ Sole Prop: _____

Provide Name(s) and contact information of Parties authorized or required to execute/sign contracts on behalf of the business entity, e.g. Corporate Officers, Managing Partners/members, etc.:

Name(s): _____

Address: _____

Street & POB City State Zip Phone

5. Federal Tax ID No.: _____ State UBI & or Act No.: _____

State Contractors License/Registration No.: _____ Exp. Date: _____

6. Contractor Property & Liability Insurance Information:

Name of Insurance Company: _____

Policy No. _____

Insurance Amounts by category: _____

Bid and/or Performance Bonding Capacity: _____

Licensed as (Check appropriate): General Contractor. _____

Specialized Contractor: _____

Describe specialty: _____

SIGNATURE: _____ Date: _____

By (Print Name): _____ Title: _____