

7. List three material suppliers and amount of credit available.

1. _____ \$ _____
2. _____ \$ _____
3. _____ \$ _____

8. List bank references and amount of credit available.

1. _____ \$ _____
2. _____ \$ _____

9. List insurance coverage and amount.

Liability-Property : _____ \$ _____
Liability-Personal Injury : _____ \$ _____
Vehicle and Equipment : _____ \$ _____
Other- _____ : _____ \$ _____
(identify)

10. List subcontractors utilized. State name, address, specialty, subcontractor license #, and years of experience.

1. Name: _____
Address: _____
Specialty: _____
License # _____ Years of Experience _____

2. Name: _____
Address: _____
Specialty: _____
License # _____ Years of Experience _____

3. Name: _____
Address: _____
Specialty: _____
License # _____ Years of Experience _____

11. Provide a general description of the experience of the company and its key personnel.

12. Number of current full-time employees _____
 Number employed at highest level in past twelve months _____
13. Are you on any list of debarred contractors maintained by the U.S. Department of Labor, U.S. Department of Housing & Urban Development, or Virginia Department of Highways? YES NO
14. All contractors, subcontractors and their workers, including electricians, must have attended Lead Safe Work Practices training in order to be considered for work under this program. Have all of your workers attended this training?
 YES NO If yes, complete the Employee Training Record.

If not, they will be required to attend the training before they can work on a project site. Do you need information about LSWP classes? YES NO

The undersigned hereby authorizes and requests any person, firm or Corporation to furnish any information requested by _____ in verification of the recitals comprising this statement of contractor's qualifications:

Contractor: _____
 By: _____
 Title: _____
 Date: _____

STATE OF _____

COUNTY OF _____

_____ being duly sworn deposes and says that he/she is
 _____ of _____
 and that the answers to the foregoing questions and all statements therein contained are true and correct.

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF
_____,
20__.

NOTARY PUBLIC _____

MY COMMISSION EXPIRES _____, 20__

Email applications to dbolen@thewiredroad.net or mail to:

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