



LeadSafe Homes Program Contractor Application

44 Washington Street, Providence, RI 02903 401-450-1350 Fax: 401-450-1364

Organization Information

Name of Company: _____

Business Address: _____

Contact Numbers: Office _____ Fax: _____
Cell: _____ Email: _____

Business Operations

Contact Person: _____ Title: _____

Tax I.D. #: _____ or Social Security #: _____

Have you been a general contractor for 2 years or more? Yes ___ No ___

If yes, please provide RI License # _____

If no, please explain: _____

What is the scope of work performed by your company with its own employees?

Please attach a list of your company's five (5) most recent completed lead hazard reduction projects, including the project address, dates the work was performed, general scope of work and the names, addresses and telephone numbers of the property owners for whom the projects were performed.

Please attach a list of your company's employees Contractor Agent, Supervisor(s), Worker(s) and Worker(s) - in- Training who perform lead hazard reduction work. Include their state lead license number, how long they have been licensed, and where they received their training.

Please attach a copy of your current Rhode Island Contractor's Registration Board Identification Card and your Rhode Island Lead Hazard Reduction Contractor license(s).

Insurance

Commercial General Liability (C.G.L) Insurance in the amount of \$500,000 is required of all Contractors, as well as proof of Worker's Compensation Insurance.

Please list below the insurance carrier's name, address, telephone number and contact person, and the type, amount, policy number and effective dates of all insurance policies related to your lead hazard reduction work. Please attach copies of certificates for all required insurances.

1. C.G.L. _____
2. Workers Comp. _____
3. Other: _____

Claims and Suits

If the answer to any of the following questions is "yes", please provide the date and the location of the project, the property owner's name and a description of how the allegations were resolved.

1. Has your company paid any contractual penalties for breaches of contracts such as overruns of completion time or liquidated damages? Yes ___ No ___
If yes, please explain: _____

2. Are there any citations, judgments, claims, arbitration proceedings, suits or consent agreements pending or outstanding against your company for alleged violations related to your lead hazard reduction work? Yes ___ No ___
If yes, please explain: _____

3. Have you had any lead hazard reduction projects terminated prior to completion? Yes ___ No ___
If yes, please explain: _____

4. Have you ever had a complaint filed with the Contractors Registration Board? Yes ___ No ___
If yes, please explain: _____

I, _____ (Print) hereby attest under the pains and penalties of perjury that all information and answers contained herein are complete, true and correct.

Signature _____ **Date:** _____

Title: _____