

City of Ellensburg Energy Services Department Small Works Roster

Please complete, sign and return to:

City of Ellensburg
Energy Services Department
501 North Anderson Street
Ellensburg, WA 98926
Phone: (509) 962-7124
Fax: (509) 925-8662

Contractor's Name: _____

Business Name: _____

Address: _____

Telephone Number: _____

Fax Number: _____

E-Mail: _____

State License Number: _____

UBI (Unified Business Identifier) Number: _____

Please place an "X" beside the type of work you wish to be considered for, and indicate your current bonding capacity if less than **\$300,000**. The appendix column identifies the prequalification form, if any, that must be completed and returned.

Type of Work	X	Pre-Qual. Form	Bonding Limit
Electrical Energized OH & UG Distribution Line Work		A	
Electrical Non-Energized UG Distribution Line Work		B	
Electrical Services & Customer Line work OH & UG (600 v)		C	
Electrical Substation Maintenance (12.5 kv & Up)		D	
Electrical Line Tree Trimming		E	
Electrical Utility Pole Testing & Treating		F	
Electrical Watt-hour Meter Testing/Auditing		G	
Electrical PCB Testing & Disposal		H	
Natural Gas Mains & Services Installation		I	
Natural Gas Meter Recalibration & Repair		J	
Natural Gas Leak Survey		K	
Natural Gas Flo-Stop/Stopple Work		L	
Natural Gas Cathodic Protection System Work		M	
Natural Gas Hydrostatic Testing		N	
Natural Gas Non-Destructive Testing Services		O	
Natural Gas Pipeline Inspection Services		P	
Telecommunications Fiber Optic & Wireless OH & UG		Q	
Utility GPS Data Collection		None	
Utility Civil Work Installation (Trenching, Casings, Vaults)		None	
OTHER -		None	

Statement of General Qualifications

I hereby maintain that I have adequate equipment, personnel, financial reserves and experience to complete the work as outlined in my application for the City of Ellensburg Small Works Roster.

1. I have engaged in the contracting business under my present firm name for ___years. If less than five years, list name(s) of any previous business(s) in last five years.

2. The general character of work performed by my company is as follows:

3. Have you ever failed to complete any work awarded to you? _____ If so, where and why?

4. Have you ever defaulted on a contract? _____ If so, where and why?

5. I have the following equipment, which I own, available for this work:

6. I have adequate funds to promptly meet obligations incidental to work (list bank reference with address and telephone number).

7. If not completing any of the Prequalification forms (Appendices A – Q), please list 2 references below for contracts with similar companies.

Project Name and Location	Company	Project Manager Name	Project Manager Phone No.	Contract Amount

I certify that the above is a true and accurate statement:

Signature: _____ Title _____

Print Name: _____ Date: _____