CHIP Contractor Application Form

Attached is a copy of the CHIP Contractor Application Form for interested contractors. Listed below are items that need to be attached to the Contractor Application form:

- A copy of State Contractor’s License
- A copy of Insurance coverage including Worker’s Comp
- A Copy of EPD-Lead Safety Renovator Certification
- Employment Eligibility Verification - (E-Verify/SAVE Registration)
  
  (See attached: Contractor affidavit form and agreement)

If you have any questions concerning the application form, please call Mrs. Brenda Wade, Grants Administration Manager at the Southwest Georgia Regional Commission at (229) 522-3552 Extension 105.

Also, to find an accredited trainer for the LEAD-SAFE Certification in your local area or get information, go to epa.gov/getleadsafe or call 1-800-424-LEAD.
COMMUNITY HOME INVESTMENT PROGRAM (CHIP) GRANT
Contractor Qualification Registration

Please furnish the information requested below. This information will be used to determine your eligibility. The Program Administrator will verify information you supply for subcontractors and personnel.

Business Name

Owner(s)

Authorized Agent

Business Address

City State Zip

Work Phone Mobile Fax

Email

Type of Business: Corporation/LLC ___ Partnership ___ Sole Proprietorship ___

Tax Id # ___________________ (or SS # if sole proprietor)

Types of construction and trades in which your company has current capacity to perform (check all that apply):

_____ General Contractor _____ HVAC _____ Electrical _____ Masonry _____ Painting _____ Plumbing

_____ Lead Paint Abatement _____ Asbestos Abatement

_____ Other __________________

State Contractor License Number __________________ Type __________________

Lead-based Paint RRP Certification Number __________________

Other license or certification number(s) _______________________________________

Provide copies of all licenses and certifications.

Approximate number of jobs you have completed as a trade or general contractor ____________

Typical number of jobs per year ______ Largest dollar amount (per job) $ ____________

Number of years your company has been in business ________________

Number of regular company employees ______ (excluding subcontractors)

Are you a certified Disadvantaged/Minority/Woman Business Enterprise? _____ Yes _____ No

Are you a Section 3 Contractor or Section 3 Business? _____ Yes _____ No
Have the principals or owner(s) of the company ever had a construction business under other name(s)?
____ Yes  _____ No  If yes, list the following information:

Company Name ___________________________ Dates ____________
Address __________________________________

List three (3) references of clients that you have completed work for or have jobs in progress:

<table>
<thead>
<tr>
<th>Client Name</th>
<th>Project Address</th>
<th>Contact Phone</th>
<th>Dollar Value of Project</th>
<th>% Complete</th>
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List three (3) major suppliers from whom you purchase materials:

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<tr>
<th>Supplier Name</th>
<th>Type of Materials Purchased</th>
<th>Contact Name</th>
<th>Contact Phone</th>
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List Banking Relationships:

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<tr>
<th>Bank/Financial Institution Name</th>
<th>Contact Name</th>
<th>Contact Phone</th>
<th>Type of Account or Credit Line Limit</th>
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List four subcontractors with whom you currently do business:

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<th>Company</th>
<th>Trade</th>
<th>Contact Name</th>
<th>Contact Phone</th>
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Do you guarantee your work for at least a period of one year?  _____ Yes  ____ No
Written warranty will be required if bid is accepted.

List any projects in which your company has been found negligent after an insurance claim, court action or other damage claim: ________________________________

Are you party to any ongoing lawsuits or are there any outstanding liens against your company?
____ Yes  ____ No

If yes, describe: ________________________________________________________________
Agreement:

The undersigned contracting firm agrees that in consideration for being placed upon the “Acceptable Contractors’ Register”, he/she understands and will comply with the following conditions on all rehabilitation or reconstruction work performed on properties under the Southwest Georgia Regional Commission CHIP program:

1. That work will be performed in accordance with the CHIP program Written Rehabilitation Standards and all Building Codes as required by the Southwest Georgia Regional Commission. Upon completion, the work will meet the Southwest Georgia Regional Commission State Recipient’s requirements for the CHIP program, subject to such inspections as deemed as necessary by the Southwest Georgia Regional Commission Building Department.

2. That if a bid is accepted, the required General Liability, Auto Liability, and any required Workman’s Compensation Insurance will be provided; and that the Contractor will execute the required Southwest Georgia Regional Commission Indemnity/Hold Harmless Clause.

3. That the Contractor will abide by Equal Opportunity provisions of the Civil Rights Act.

4. That the Contractor will present a signed affidavit indicating compliance with the Federal Work Authorization program (E-Verify) per O.C.G.A. 13-91.

5. That the Contractor will follow Section 3 Guidelines regarding the hiring of new employees and that certain reporting is required prior to final payment. The CHIP Program Section 3 requirements will be provided prior to contract signing.

6. That if work performed by the Contractor is found to be unsatisfactory by the Southwest Georgia Regional Commission; or if contract relations between the Contractor, homeowner, or other parties is found to be unsatisfactory, that the Southwest Georgia Regional Commission may remove the Contractor’s name from the “Acceptable Contractor’s Register.”

7. That my withdrawal of bid without justification would remove the contractor’s name from the “Acceptable Contractor’s Register.”

In connection with this application for my approval as a contractor on the “Acceptable Contractors’ Register”, I authorize the Southwest Georgia Regional Commission or its CHIP program agent to make inquiries as necessary to verify the accuracy of statements made and to determine my creditworthiness. I further certify that the above information is true and complete.

______________________________  __________________________
Signature (Authorized Representative)  Date

______________________________  __________________________
Name (printed)  Title

______________________________  __________________________
Address  Phone

Equal Housing Opportunity
Southwest Georgia Regional Commission CHIP Grant
Contractor Qualification Registration

Retain page 4-5 for your records.

Attachments:
The following documents must be attached with this application.
If attachments are not submitted, your application will be considered incomplete and discarded:

1. Copy of Current Contractor and/or Trade License(s)
2. Copy of Lead-Based Paint Renovation, Repair & Painting Program (RRP) Certification
3. Contractor Affidavit verifying compliance with the federal work authorization program per
   O.C.G.A. 13-91------ (E-verify and SAVE form attached).
4. Lead Paint &/or Asbestos Abatement Certification, if applicable
5. Verification of DBE/MBE/WBE status, if applicable
6. Verification of Section 3 Contractor status, if applicable

Return Form and Attachments by the prescribed to:

Southwest Georgia Regional Commission
Attn: Brenda Wade, Grants Administration Manager
181 East Broad Street
Post Office Box 346
Camilla, GA 31730

Office: (229) 522-3552
Fax: (229) 522-3558
Email Address: bwade@swgrc.org
Southwest Georgia Regional Commission, Contractor Insurance Requirements:

The apparent successful bidder will be required to provide proof of general liability and auto liability insurance coverage, and adequate worker’s compensation (if applicable) before entering into a contract. Additionally, the local government where services are rendered may, at its sole discretion, require the apparent successful bidder to provide proof of adequate professional malpractice liability or other forms of insurance. Failure to provide evidence of such insurance coverage is a material breach and grounds for termination of the contract negotiations. Any insurance required by the City shall be in form and substance acceptable to the City. The successful bidder shall not commence work until all insurance requirements have been obtained and such insurance has been approved by the Owner.

The Southwest Georgia Regional Commission requires that the City be listed on each of the insurance policies as an “additional insured”. This inclusion must appear on the certificates that are provided to the City and/or the Owner. The insurance certificate shall include the following statement:

The Southwest Georgia Regional Commission, Georgia is included as an additional insured with respect to any claim, demand, suit or action brought against the Southwest Georgia Regional Commission and arising from or related to the performance of the contract to which this certificate is attached.

No change or cancellation in insurance shall be made without thirty (30) days written notice to the City Grant Administrator. Insurance coverage required in these specifications shall be in force throughout the contract term. Should any bidder fail to provide acceptable evidence of current insurance within five (5) days of receipt of written notice at any time during the contract term, the City shall have the right to consider the contract breached and justifying the termination thereof. The required insurance includes the following:

a) **Comprehensive General Liability** –

   The bidder shall procure and shall maintain during the life of the Contract Agreement, such Comprehensive General Liability insurance as shall protect the City, homeowner, bidder and any Sub-bidders or others working on the premises of the Owner in connection with this project, or performing work covered by this contract from claims for damages for bodily injury, including accidental death, as well as from claims for property damages, which may arise from operations under the Contract Agreement, whether such operations are by himself or by anyone directly, or indirectly employed or contracted with, by him.

   General Liability Insurance shall not be less than the following:
   - $1,000,000 Bodily injury, including death, each occurrence.
   - $500,000 Property Damage, each occurrence
   - $1,000,000 Property Damage, in the aggregate

b) **Vehicle Liability** - The bidder shall procure and shall maintain during the life of the Contract Agreement, Comprehensive Automobile (Motor Vehicle) Liability insurance in amounts not less than the following:

   - $500,000 Bodily injury or death to any one person
   - $1,000,000 Bodily injury, each occurrence
   - $300,000 Property damage, each occurrence

   The insurance shall be the greater of the above shown figures or that as required by the State of Georgia. The insurance shall include coverage for owned, leased, and rented vehicles, as well as equipment, trailers, etc.

c) **Worker’s Compensation** – If applicable, the bidder shall procure and shall maintain during the life of the Contract Agreement, Worker’s Compensation insurance for all of his employees, if any, to be engaged in work on the project under this Contract. This insurance should be for the amount required by the State of Georgia.