



P. O. Box 12870
120 W. Mistletoe Ave.
San Antonio, TX 78212
P: 210-281-0234 ext. 207
F: 210-281-0238

Contractor Application

Date: _____

Company Name: _____

Address: _____

(city, state, zip code)

Contact Person: _____

Office Phone: _____ Cell Phone: _____ Fax: _____

Email: _____ Website: _____

ORGANIZATION

1. Type of Organization: _____
(Individual, Corporation, Partnership, etc.)

2. Tax ID# or SSN: _____

3. DUNS #: _____

4. Date of Organization: _____

5. List all Principals: (Owner, President, Vice-President, Secretary-Treasurer, Partner, etc.)

Name	Title
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_____	_____
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_____	_____
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6. Under what other names and dates have you or your organization operated?

EXPERIENCE

1. How long has your company been in the contracting business in Bexar County?

_____ Years _____ Months

2. Approximately how many homes has your company rehabilitated? _____

3. Check the types of construction your company has performed in the last year:

☐ Home Rehabilitation:

Largest Job \$ _____ Smallest Job \$ _____

☐ Single Family New Construction:

Largest Job \$ _____ Smallest Job \$ _____

4. Please select the areas below in which you are competent:

- | | | |
|--|---|--|
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Masonry | <input type="checkbox"/> Siding |
| <input type="checkbox"/> Carpeting | <input type="checkbox"/> Painting | <input type="checkbox"/> Storm Windows |
| <input type="checkbox"/> Drywall/Taping/Floating | <input type="checkbox"/> Plastering | <input type="checkbox"/> Stucco |
| <input type="checkbox"/> Glazing | <input type="checkbox"/> Roofing | <input type="checkbox"/> Tiling |
| <input type="checkbox"/> Insulation | <input type="checkbox"/> Mobile Home Repair & Servicing | |

5. Are you licensed in the following trades:

Plumbing ☐ Yes ☐ No

Electrical ☐ Yes ☐ No

HVAC ☐ Yes ☐ No

6. List below the names and addresses of five housing rehabilitations your company has completed within the last two years:

Homeowner Name	Address	Phone Number	Contract Amount

7. On Attachment A of this application, list any construction projects your company has in progress or has under contract. Provide the address, owner, contract amount, percent complete and scheduled completion date.

8. Have you ever worked for any of the following (check all that apply):

Agency	Position/Project	Last Date of Employment
<input type="checkbox"/> HUD		
<input type="checkbox"/> VA		
<input type="checkbox"/> FHA		
<input type="checkbox"/> City of San Antonio		

LICENSING

1. City Contractors License No.: _____ Exp. Date(s): _____
2. List any additional licenses maintained by your company (locally and other):

REFERENCES

1. List three major suppliers from which you purchase most of your materials:

	NAME	ADDRESS	PHONE
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____

2. List two financial institutions with which you have established credit:

a. Company Name: _____
Address: _____
Contact Person: _____ Phone: _____

b. Company Name: _____
Address: _____
Contact Person: _____ Phone: _____

3. List subcontractors you normally use for the following trades. If you do not use subcontractors for a given trade, indicate with N/A:

	NAME	ADDRESS	PHONE
Electrical:	_____	_____	_____
Plumbing:	_____	_____	_____
HVAC:	_____	_____	_____
Masonry:	_____	_____	_____
Drywall:	_____	_____	_____
Carpentry:	_____	_____	_____
Foundation:	_____	_____	_____

4. Claims and Suits. (If you answer yes to any of the following questions, please explain on a separate sheet.)
5. Have you ever declared bankruptcy? ☐ Yes ☐ No Year _____
6. Have you ever had a judgment filed against you or made settlement with creditors?
☐ Yes ☐ No
7. Do you or your company have any suits or other legal proceeding pending?
☐ Yes ☐ No
8. Has your company ever failed to complete any work awarded to it?
☐ Yes ☐ No

I HEREBY STATE THAT THE INFORMATION PROVIDED ON THIS FORM IS TRUE AND SUFFICIENTLY COMPLETE SO AS NOT TO BE MISLEADING. FURTHER, I AGREE TO NOTIFY MERCED HOUSING TEXAS OF ANY MATERIAL CHANGE IN THE ABOVE STATEMENTS. I AUTHORIZE MERCED HOUSING TEXAS TO OBTAIN SUCH INFORMATION AS IT MAY REQUIRE CONCERNING THE STATEMENTS MADE IN THIS APPLICATION AND AGREE THAT THE APPLICATION SHALL REMAIN THE PROPERTY OF MERCED HOUSING TEXAS WHETHER OR NOT APPROVAL IS GRANTED.

Company Name _____

Address _____

By (Signature) _____ Title _____

Printed Name _____ Phone _____

Date _____

ATTACHMENT A
CURRENT PROJECTS

Project Description	Address	Owner/Phone Number	Contract Amount	Percent Complete	Scheduled Completion Date