CONTRACTOR APPLICATION

WORKING IN NEIGHBORHOODS (WIN)
HOUSING DIVISION

175 East Second Street, Suite 480
Tulsa, OK 74103

Telephone
918.576.5552

Fax
918.223.8414

Website
www.CityofTulsa.org/winhousing

Email
winhousing@cityoftulsa.org

Potential Contractor,

Thank you for showing interest in our Housing Assistance Program, attached are several documents, please read all pages in their entirety.

Please follow these instructions to the letter to assist our department in streamlining the contractor's application process.

1. Application form
    a. Read and fill this form out completely, signatures required
2. General Release and Contractor Guidelines Acknowledgement form
    a. Read, sign, and notarize
3. General Release form for AmericanChecked Inc.
    a. Read, complete form, and sign
4. Contractor Guidelines
    a. Read entire document, keep for your records
5. Insurance verification
    a. Have your insurance fax a "Certificate of Insurance" to 918.223.8414, the certificate holder should be:
        City of Tulsa - WIN/Housing
        175 E 2nd St Suite 480
        Tulsa, OK 74103

Once all of the above listed items are taken care of you will need to fax or scan and email the entire application (3 pages) to 918.223.8414. Once your application is received a staff member will contact you to acknowledge our receipt and let you know what the next step will be.

If you have any questions, please do not hesitate to contact our office.

Sincerely,

Ricky Najera
Working in Neighborhoods (WIN)

Contractor Application
Programs and Requirements

Emergency Repair Grant

A $7,500 maximum grant to very low income residents to make emergency repairs to conditions that threaten the health and safety of the occupants, the resident must own and occupy the residence, reside within the city limits and qualify financially. *Areas of service: Electrical, Plumbing, Roofs, Heating, Sewer lines*

Contractor information:

This program has around 300 – 350 projects every year. The projects vary from Electrical, Plumbing, Roofing, Heat and Air, to some General Contractor contracts for various interior repairs.

Requirements:

- General Liability Insurance
- Workers Comp (unless the contractor is self employed and has an exempt affidavit)
- Not De-Barred (HUD has a list of De-Barred contractors, you company cannot be on this list)
- Email Address (Your email address must have the ability to print PDF files)
- Required License/Registrations *(Electricians, Plumbers, Mechanical and Roofers)*
- All work has a one year full warranty required

Rehabilitation Loan Program

A $45,000 maximum rehabilitation loan available for moderate to very low income residents to assist citizens with home repairs, weatherization, and energy efficiency, each residence is given a rigorous inspection to include Lead Based Paint (LBP), Electrical/Mechanical/Plumbing (EMP) , Structural, and interior repairs. The resident must own and occupy the residence, reside within specific targeted zones of the Tulsa city limits and qualify financially. This is a loan program that is either deferred until the residence changes ownership or the resident is set up on a payment plan based on their income. *Areas of service: Lead Based Paint, Electrical, Plumbing, Security (doors and windows), Roofs, Heating, Interior issues, Weatherization.*

Contractor information:

This program has around 30 – 40 projects every year. The projects are awarded to General Contractors that are capable of managing these projects in a responsible manner. The contractor must be able to finance a minimum of 70% of the project before receiving any funding. These projects are a turn key contract, therefore the General Contractor must be able to hire sub-contractors and be responsible for paying those sub-contractors.

Requirements:

- General Liability Insurance
- Workers Comp (unless the contractor is self employed and has an exempt affidavit)
- Not De-Barred (HUD has a list of De-Barred contractors, you company cannot be on this list)
- Email Address (Your email address must have the ability to print PDF files)
- Required License/Registrations *(Electricians, Plumbers, Mechanical and Roofers)*
- Lead Base Paint training, certificates and firm with EPA
- All work has a one year full warranty required

Contractor Application

Working In Neighborhoods Department – Housing Division

Firm Information PRINT CLEARLY AND LEGIBLY

Name of Firm: _____ **Legal description**

Street Address: _____ ☐ Corporation

City ST Zip ☐ Sole Proprietorship

Telephone: _____ Cell: _____ ☐ Partnership

Employer's Fed. I.D. No. _____ DUNS #: _____

(Obtain at http://fedgov.dnb.com/webform)

Email for bidding: _____

Social Security # for all company owners: _____

Number of years in Business: ____ Number of Employees: ____ Office staff ____ Field staff

Type of Company:

☐ General Construction ☐ Plumber ☐ Electrician ☐ Mechanical ☐ Roofer

License No. or Registration No.: _____ Expires: _____

Identify all individuals who own or share ownership of this firm:

Name	Race*	Sex	% of ownership

*Black/African American, Alaskan Native, Asian, Native Hawaiian, Hispanic, Native American, Pacific Islanders, White

Identify all individuals who are authorized to sign bids and agreements (other than owners listed above):

Name	Phone	Title

Insurance information:

Amount of General Liability Insurance: _____ $500,000 for each occurrence and $1,000,000 aggregate minimum

Amount of Worker's Compensation: _____ State minimum required

Amount of Auto Liability _____ State minimum required

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Criminal/Legal History:

Have any members of the firm been sued within the past 18 months by sub-contractors, suppliers or customers?
Yes ☐ No ☐ If so, please attach an additional page explaining the details and outcome.

Has any of the owners of the company ever been convicted of a felony?
Yes ☐ No ☐ If so, please attach an additional page explaining the details and outcome.

References – all references will be contacted by WIN staff and confirmed

Supplier or Sub-Contractor

	Supplier/Sub contractor	Description	Telephone	Contact
1.				
2.				
3.				
4.				

List Three (3) Customers you have completed work in the past 12 months

	Name	Description of work	Telephone	$ Amount
1.				
2.				
3.				

Comments: (list any additional comments you would like our agency to know about your company)

_____

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General Release and Contractor Guidelines Acknowledgement Form

I _____(print name) working for and representing _____(print company name) hereby acknowledge the receipt of the City of Tulsa Working In Neighborhoods – Housing Division, Contractor Guidelines, Version 2.01. I also acknowledge that I will fully examine the Contractor Guidelines and agree to follow the Contractor Guidelines.

I _____(print name) hereby authorize the City of Tulsa, WIN Department or its designated agents to obtain and receive all record(s) and information pertaining to my eligibility for the bidding on rehabilitation and emergency work for the Housing assistance programs, including my employment, income, (including IRS returns), credit, residency and banking information from all persons, companies, or firms holding or having access to such information. This authorization hereby gives the City of Tulsa, WIN Department or its designated agents the right to request all information that we can or could obtain from any person(s), company or firm on any matter referred to above. I agree to have no claim for defamation, violation of privacy or otherwise against any person or firm or corporation by reason of any statement or information released by them to the City of Tulsa, WIN Department for purposes of the program. The term of this authorization shall commence on the date of signature and be in force for a period of five years commencing on the date first set forth below.

The undersigned certifies that all information in this statement, and all information furnished in support of this statement, is true and complete to the best of the undersigned's knowledge and belief.

_____	_____	_____
Signature	Title	Date
_____	_____	_____
Signature	Title	Date

Notary:

SUBSCRIBED and SWORN to before me this _____ day of _____, 20___.

_____

My Commission Expires:_____

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