SNO-ISLE LIBRARIES

STATEMENT OF CONTRACTOR INFORMATION

PROJECT: ITB BID NO. 2022.11.23 – 2022 WINDOW INSTALLATION, GLAZING, & REPAIR UNIT PRICE CONTRACT

Note: This statement must be completed, signed, and submitted as part of the Proposal packet.

BUSINESS INFORMATION

Name of Firm:	
Address:	
Payment Address:	
Contact Phone #:	
Email #:	
Contact Name:	

LICENSE & REGISTRATION INFORMATION (RCW 39.04.10 Sec. 2)

State of Washington Dept. of Licensing Contractors Registration Number:	
State of Washington Unified Business Identification (UBI) Number:	
State of Washington Dept. of Employment Security Number: Licensing	
State of Washington Dept. of Labor & Industries Workers Compensation Acct. Number:	
Washington State Excise Tax Registration Number:	
Federal Tax ID Number:	

INSURANCE AND BONDING	
Name of Insurance Company:	
Name of Insurance Agent:	
Insurance Phone Number:	
Insurance Fax Number:	

Bonding Company (If Applicable):	
Name of Bond Agent:	
Bonding Company Address:	
Bonding Phone Number:	

SUBCONTRACTORS	UBI NUMBER

Are you listed on any debarment lists:	☐Y	☐N
Are you on the list of parties excluded from the Federal procurement/Non-Procurement programs:	☐Y	☐N

The above company/vendor acknowledges the receipt of the following Addenda for the above-referenced solicitation (if applicable). Bidder acknowledges each Addendum by initialing and dating below:

Addendum #1:_____ Addendum #2_____ Addendum #3_____ Addendum #4_____

Signature   Title   Date