

**APPLICATION FOR SMALL WORKS ROSTER**

**PORT OF RIDGEFIELD  
P.O. BOX 55  
Ridgefield, WA 98642  
Ph: (360) 887-3873  
FAX: (360) 887-3403  
E-MAIL: [wbaldwin@portridgefield.org](mailto:wbaldwin@portridgefield.org)  
WEBSITE: [www.portridgefield.org](http://www.portridgefield.org)**

IF YOU WISH TO BE PLACED ON THE SMALL WORKS ROSTER OF THE PORT OF RIDGEFIELD, THE FOLLOWING APPLICATION MUST BE COMPLETED IN ALL PARTICULARS. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

YOU ARE NOTIFIED THAT THE PORT OF RIDGEFIELD COMPLIES WITH THE PREVAILING WAGE LAW OF THE STATE OF WASHINGTON (RCW 39.12) AND REQUIRES ALL CONTRACTORS TO COMPLY.

Roster Effective Dates: (January 1, 2017 – December 31, 2017)

1. Name of Company \_\_\_\_\_  
Contact Person: \_\_\_\_\_ E-mail: \_\_\_\_\_
2. Business Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax: \_\_\_\_\_
3. Check Appropriate: \_\_\_\_\_ Incorporated \_\_\_\_\_ Partnership

If incorporated, state resident agent and address. If partnership or sole proprietorship, state managing person and address.

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

4. A member of the 8(a) program under the small business administration? Yes or No \_\_\_\_\_
5. Federal Tax Identification No. \_\_\_\_\_
6. Please attach a copy of the following items:

State Licensing Information:

State of Washington Contractors' Registration

Contractors' Bond Information

Certificate of Insurance

These items and any other documents, which are required for your profession to perform work in the State of Washington, must be on file with the Port of Ridgefield for your company to be placed on the Small Works Roster.

**2017**

LIST THREE LOCAL REFERENCES:

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

Licensed as: (Check appropriate)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Carpentry/Framing      | <input type="checkbox"/> Glazing/Glass            | <input type="checkbox"/> Process Piping (Welding)    |
| <input type="checkbox"/> Carpet Laying          | <input type="checkbox"/> Gutters/Downspouts       | <input type="checkbox"/> Roofing Installation/Repair |
| <input type="checkbox"/> Concrete               | <input type="checkbox"/> HVAC                     | <input type="checkbox"/> Rotating Equipment          |
| <input type="checkbox"/> Construction           | <input type="checkbox"/> Haz Waste Work (Removal) | <input type="checkbox"/> Sanitation Systems          |
| <input type="checkbox"/> Drilling               | <input type="checkbox"/> Instrumentation          | <input type="checkbox"/> Siding (other than wood)    |
| <input type="checkbox"/> Electrical             | <input type="checkbox"/> Insulating               | <input type="checkbox"/> Signs (non-electrical)      |
| <input type="checkbox"/> Environmental          | <input type="checkbox"/> Janitorial               | <input type="checkbox"/> Steel/Aluminum Erectors     |
| <input type="checkbox"/> Excavating/Grading     | <input type="checkbox"/> Landscaping              | <input type="checkbox"/> Structural Steel            |
| <input type="checkbox"/> Fabrication (Welding)  | <input type="checkbox"/> Painting/Wall Coverings  | <input type="checkbox"/> Telecom/Cable Wiring        |
| <input type="checkbox"/> Fencing                | <input type="checkbox"/> Paving/Striping          | <input type="checkbox"/> Tracing                     |
| <input type="checkbox"/> Fiberglass Work        | <input type="checkbox"/> Planning                 | <input type="checkbox"/> Vessel Installation         |
| <input type="checkbox"/> Fire Protection System | <input type="checkbox"/> Plumbing                 | <input type="checkbox"/> Vacuum Truck                |

\_\_\_\_\_ Other (specify) \_\_\_\_\_

Date \_\_\_\_\_

Prepared By \_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Please Print Name)

Title \_\_\_\_\_

**2017**