

# City of Bellingham Small Works Application

We request to be added to the City of Bellingham's Small Works Roster in accordance with the City of Bellingham's governing guidelines.

Firm Name \_\_\_\_\_

Contact \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

State Contractor's License Number \_\_\_\_\_

City of Bellingham Business Registration Number \_\_\_\_\_

- Please include us in the following categories (DO NOT add additional categories).

Plumbing	Fencing
General Contractors	Incinerator Repairs
Electrical Work	Masonry
HVAC	Pressure Washing
Painting	Sand Blasting
Site Work, including landscaping and tree removal	Asbestos Abatement
Metal Fabrication/Welding	Demolition

- Please Attach three (3) references showing company name, address, phone number, contact name, and the project you worked on (including the scope of work). (Attach)
- Please Attach your insurance certificate naming the City as "Additional Insured", and endorsement form. [Link to Insurance requirements.](#) (Attach)

By signing below, I certify that I understand the standard terms, conditions and requirements for prevailing wages, bonding, state contractor's license, insurance and City of Bellingham business registration.

Printed Name of Signer:

Signature:

Title of Signer:

Return this application to:

City of Bellingham  
Attn: Purchasing Office  
2221 Pacific Street,  
Bellingham WA 98229  
Fax (360) 778-7706