

GREATER SYRACUSE LAND BANK

Contractor Application & Questionnaire

CONTRACTOR INFORMATION			
Business Name:			
Owner's Name:	Contact Person:	Contact Person:	
Address (Street)			
(City, Zip)			
Business Phone:	Mobile Phone:	Mobile Phone:	
Fax Number:	·	Email:	
M/WBE-certified company? YES NO			
Are you AND your company EPA/Lead Certified? YES NO			
How many employees are currently working for the company?			
How many years has the company been in business?			
TYPES OF WORK PERFORMED BY COMPANY			
Roofing YES NO	Siding YES N	0 🗌	Windows YES NO
Electrical YES NO	Plumbing YES	NO 🗆	HVAC YES \(\text{NO} \(\text{NO} \)
Drywall YES NO	Interior Painting \	'ES 🗌 NO 🗌	Exterior Painting YES NO
Kitchens/Baths YES NO	Flooring YES	NO 🗆	Paving YES NO
Kitchens/Baths YES NO Other:	Flooring YES	NO 🗆	Paving YES NO
	Flooring YES	NO 🗌	Paving YES NO
	Flooring YES	NO 🗆	Paving YES NO
	Flooring YES	NO 🗆	Paving YES NO
Other: REFERENCES: PLEASE PROVIDE			
Other: REFERENCES: PLEASE PROVIDE Name: Add	JOB REFERENCES FROM T		S
Other: REFERENCES: PLEASE PROVIDE Name: Add Name: Add	F JOB REFERENCES FROM To dress/Phone: dress/Phone:		S Job:
Other: REFERENCES: PLEASE PROVIDE Name: Add Name: Add Name: Add	<i>JOB REFERENCES FROM T</i> ress/Phone:		S Job:
Name: Add Name:	TOB REFERENCES FROM TO PROSE P		Job: Job:
Name: Add Name:	Topic states of the state of th		Job: Job: Job:
REFERENCES: PLEASE PROVIDE Name: Add	Topic states of the state of th		Job: Job: Job: Job: Job: