



**COLLEGE PLACE PUBLIC SCHOOLS NO. 250**  
**2011 Small Works Roster Application**

Company Name \_\_\_\_\_

Address (plant) \_\_\_\_\_  
(office) \_\_\_\_\_

Phone Numbers \_\_\_\_\_

Individual – Date Formed \_\_\_\_\_

Partnership – Date Formed \_\_\_\_\_

Corporation – Date Formed & State \_\_\_\_\_

Affiliated Companies \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Washington State Contractors License # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Please return to: College Place School District No. 250  
Attn: Julie James  
1755 South College Avenue  
College Place, WA 99324  
(509) 525-4827 Fax: (509) 525-3741

**Please fill out next page completely.**

1. Explain type of work your company is prepared and equipped to perform. Include appropriate brochures if available.

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2. We understand and accept responsibility to maintain a safe work environment by adhering to applicable State and Federal Safety precautions in all areas for the duration work is being performed whether workers are on or off site.

Yes                       No

3. Will you provide performance/payment bond and insurance certificates for work to be performed when required by the district?

Yes                       No

4. College Place Public Schools No. 250 is an equal opportunity and affirmative action employer and the provisions of Executive Order 11264, dated September 9, 1965 as amended, will apply to any work performed by you for College Place Public Schools. Do you comply with these requirements?

Yes                       No

5. We understand that prevailing wage rates are required to be paid, if employees are used. We accept responsibility to complete appropriate State of Washington Department of Labor and Industry forms and processes to maintain compliance.

Yes                       No

6. Requests for quotations should be directed to:

Name: \_\_\_\_\_

Authorized Company Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_