

# Contractor Application Form



## ***Housing Repair Assistance Program***

<b>General Business Information</b>	
Name of Business	
City of Renton Business License Number <i>(Required Information)</i>	
I am a minority- or woman-owned business enterprise (WMBE): Yes ___ No ___	
Preferred means of communication <input type="checkbox"/> Email <input type="checkbox"/> Phone number <input type="checkbox"/> Fax	
<b>Contact person for work orders:</b>	
Name	Phone
Email	Fax

**Category of work performed. Please check all that apply.**

<input type="checkbox"/> Electrical	<input type="checkbox"/> HVAC Furnaces and Heat Pumps	<input type="checkbox"/> Roof and Gutter Cleaning
<input type="checkbox"/> Fireplaces and Woodstoves	<input type="checkbox"/> Manufactured Home Repairs	<input type="checkbox"/> Roofing
<input type="checkbox"/> Flooring	<input type="checkbox"/> Masonry	<input type="checkbox"/> Security Locksmith
<input type="checkbox"/> General Contracting	<input type="checkbox"/> Pest Control	<input type="checkbox"/> Sewer and Septic Tanks
<input type="checkbox"/> Glass Installation	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Waterproofing
<input type="checkbox"/> Hazardous Waste Clean-up	<input type="checkbox"/> Ramps	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Please specify):		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Submit completed application form to:**

City of Renton, Housing Repair Assistance Program  
 Attn: Mark Baldrige, Housing Repair Coordinator  
 1055 South Grady Way, 6<sup>th</sup> floor  
 Renton, WA 98057