



TOWN OF RIVERHEAD
Community Development Department
4 WEST SECOND STREET, RIVERHEAD, NEW YORK 11901
(631) 727-3200, Ext. 287 Fax (631) 727-5772 TDD (631) 727-4500

Dawn Thomas, Director

Dear Interested Contractor:

The Town of Riverhead Community Development Department bids out numerous contracts throughout the year for various home improvement projects for Manufactured / Mobile and single-family homes owned by low- and moderate-income residents. As part of this Home Improvement Program, the Community Development Department maintains a list of home improvement contractors (general contractors, plumbers, electricians, heating, etc.) interested in bidding on home repair projects in the range of \$500 to \$100,000.

If you would like to qualify to receive bids and potentially obtain contracts under this program, please complete the enclosed application and return it to the Community Development Department at the above address. Please also submit a copy of your current license(s) and proof of current insurance coverage.

If you have any questions, please contact (631)727-3200 ext. 237.

Thank you.

Town of Riverhead Community Development Department

The Town of Riverhead is an equal opportunity provider and employer. Discrimination is prohibited by Federal Law. Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact our office at one of the numbers listed above.

PERSONNEL (please indicate full/part time and how many in each category)

	Current Payroll	For Previous 3 Fiscal Years
A. Clerical	_____	_____
B. Engineers & Architects	_____	_____
C. Supervisors & Foremen	_____	_____
D. Skilled Employees	_____	_____
E. Unskilled Employees	_____	_____
F. Job Estimates	_____	_____
G. Total Number of F/T Personnel	_____	_____

Please answer the following:

1. Have you, in the previous five years, been denied a contract award on which you submitted the low bid in competitive bidding, or been refused pre-qualifications? _____ If so, please describe _____

2. Within the previous five fiscal years, has your organization (or predecessor organizations) ever failed to complete a project? _____ If so, please explain and list current status _____

3. Within the previous three fiscal years, has your organization been involved in any litigation with New York State? _____ If so, please explain and list current status _____

What is the *Construction Experience* of the Employees and Supervisory Personnel of your organization that will be assigned to the project being bid?

Employees Name: _____ **Title:** _____
Years of Construction Experience _____ in **What Capacity and with Whom** _____

Employees Name: _____ **Title:** _____
Years of Construction Experience _____ in **What Capacity and with Whom** _____

Employees Name: _____ **Title:** _____
Years of Construction Experience _____ in **What Capacity and with Whom** _____

Supervisory Personnel: _____ **Title:** _____
Years of Construction Experience _____ in **What Capacity and with Whom** _____

Supervisory Personnel: _____ **Title:** _____
Years of Construction Experience _____ in **What Capacity and with Whom** _____

Supervisory Personnel: _____ **Title:** _____
Years of Construction Experience _____ in **What Capacity and with Whom** _____

Please list the most recent jobs (or Town contracts) completed by your organization in the previous three fiscal years (list at least 3 or more jobs completed).

Name (Project or Client) _____

Address/ Location _____

Description of Job _____

Type of Work Done _____

Contact Person (client) and Tel. # _____

Contract Price \$ _____ Original \$ _____ Final \$ _____

Completion Dates: Original Date _____ Revised Date _____

Actual Job Completion Time (days/weeks) _____

Name (Project or Client) _____

Address/ Location _____

Description of Job _____

Type of Work Done _____

Contact Person (client) and Tel. # _____

Contract Price \$ _____ Original \$ _____ Final \$ _____

Completion Dates: Original Date _____ Revised Date _____

Actual Job Completion Time (days/weeks) _____

Name (Project or Client) _____

Address/ Location _____

Description of Job _____

Type of Work Done _____

Contact Person (client) and Tel. # _____

Contract Price \$ _____ Original \$ _____ Final \$ _____

Completion Dates: Original Date _____ Revised Date _____

Actual Job Completion Time (days/weeks) _____

* If you would like to provide more job listings (that you have recently completed), please attach them to the application.

**ALONG WITH YOUR *COMPLETED APPLICATION*, PLEASE SEND A COPY OF YOUR
CURRENT LICENSE(S) (HOME IMPROVEMENT, ELECTRICAL, PLUMBING, ETC....) AND
A COPY OF YOUR CURRENT INSURANCE TO:**

**COMMUNITY DEVELOPMENT DEPARTMENT
C/O RIVERHEAD TOWN HALL
4 WEST SECOND STREET
RIVERHEAD, NY 11901**

I hereby certify that all information provided herein is true and accurate to the best of my knowledge and authorize the Town of Riverhead to verify my credit of worthiness at its discretion.

Signature of Owner
Date: _____

Signature of Owner
Date: _____