City of Nashua
Community Development Division
City Hall, 229 Main Street, PO Box 2019
Nashua, New Hampshire 03061-2019
www.gonashua.com

Community Development	589-3095
Planning and Zoning	589-3090
Building Safety	589-3080
Code Enforcement	589-3100
Urban Programs	589-3085
Conservation Commission	589-3105
FAX	589-3398

Dear Contractor,

The City of Nashua's Housing Improvement and Lead Paint Programs (HIP) will maintain a list of pre-qualified contractor's who will be notified of upcoming projects/bids. Contractors will be notified via e-mail, however if you do not have e-mail access, please indicate your preferred method on this application. Additionally, all projects will be posted on the City's website at www.gonashua.com under Community Development, Urban Programs, Housing.

Insurance requirements will be listed in the scope of work for each project. All contractors must provide proof of RRP Certification. Other required licenses may be requested at the time of contract signing and at a minimum are required to secure applicable permits.

Please complete this packet if you wish to be added to our list of pre-qualified contractors. These forms will be used by the Urban Programs Department to evaluate the qualifications of contractors. Submission of these forms does not guarantee participation or award of any bids.

Please contact Robert Rice, Project Administrator at 603-589-3085 or ricer@nashuanh.gov for the HIP Program or Carrie Johnson Schena (schenac@nashuanh.gov) at 603-589-3087 for the Lead Program if you have any questions.

Thank you,
Carrie Johnson Schena, Manager
City of Nashua, Community Development Division
Urban Programs Department

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URBAN PROGRAMS DEPARTMENT
LEAD ABATEMENT & HOUSING REHABILITATION PROGRAM
CONTRACTOR APPLICATION FORM

1. Business Name: _____

2. Contact Person: _____

3. Address: _____

_____

4. Business Phone: _____

5. E-mail Address*: _____

*Notification of upcoming projects/bids will be sent via e-mail. If you prefer an alternate method, please indicate.

6. Business Organization:

Corporation: _____ Partnership: _____ Proprietorship: _____

6a. Principals of Firm:

Name: _____ Address: _____

Name: _____ Address: _____

6b. MBE Status: _____ WBE Status: _____

6c. Is the business majority owned (51% or more) by a person residing in the City of Nashua?

YES NO

7. List Trades: _____

_____

7a. Please indicate which types of projects you would like to be notified of (you may select both):

Housing Improvement/General Contracting ☐ Lead Hazard Work ☐

8. Geographic Area of Business: _____

9. Number of Years in Business: _____

10. Number of Years Under Present Name: _____

11. License Numbers/Type (List All) _____

_____

12. Volume of Work Currently Under Contract: _____

13. Insurance Agent Name: _____

Liability Amt: _____

Property Amt: _____

Workers' Comp: _____

14. Furnish the following information with respect to an accredited banking institution familiar with your organization:

Name of Bank: _____

Address: _____

_____

Telephone: _____

15. Please list any other government agencies you have worked for:

_____

_____

16. Have you, or your company, ever been barred from participation in a local, state, or federal program? If yes, provide the name of the program and details:

_____

_____

17. If you are a licensed Lead Abatement Contractor, please list recent projects and contract amounts:

_____

_____

18. Licensed Lead Abatement Contractors – please attach copies of current licenses for all staff involved.

PROJECT REFERENCES

1. Name: _____

Address: _____ City: _____

Telephone: _____ Date Completed:_____

2. Name: _____

Address: _____ City: _____

Telephone: _____ Date Completed:_____

3. Name: _____

Address: _____ City: _____

Telephone: _____ Date Completed:_____

I/We_____the undersigned contractor or contractor's agent hereby certify that I/We will comply fully with the guidelines and regulations of the City of Nashua's Home Improvement Program. I/We attest that the enclosed information is true and accurate to the best of my/our knowledge.

Signed under the Pains and Penalties of Perjury this _____ day of _____, 20___.

_____ _____

Signature Title

--Office use only--

Reviewed by: _____ Date: _____

Comments: _____

_____

Approved: ☐ Denied: ☐ Reason:_____

Signature/Title: _____