



# MOUNT SHASTA UNION SCHOOL DISTRICT

## CUPCCAA Application for Informal Bidding

### Registration

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### Contractor Information

Firm Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

License Number \_\_\_\_\_ (District to check through DIR)

License Classification(s) \_\_\_\_\_

License Comments (include information about C61-Specialty if relevant)

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### Business Certifications

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Select at least one business certification:

- Minority Business (MBE)
- Disadvantaged Business (DBE)
- Disabled Veteran Business (DVBE)
- Women Owned Business (WBE)
- Small Business (SBE)
- None

## Qualification

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Yes  No Does Contractor possess a valid and current California Contractor's license for the project or projects for which it intends to submit a bid?

Yes  No Does Contractor have a liability insurance policy in accordance with minimum State requirements?

Type Of Coverage	Minimum Requirement
<b>Commercial General Liability Insurance</b> , including Bodily Injury, Personal Injury, Property Damage, Advertising Injury, and Medical Payments Each Occurrence General Aggregate	 \$ 1,000,000 \$ 2,000,000
<b>Automobile Liability Insurance - Any Auto</b> Each Occurrence	\$ 1,000,000
<b>Workers' Compensation</b>	Statutory Limits
<b>Employer's Liability</b>	\$ 1,000,000

Yes  No Does Contractor have current workers compensation insurance policy as required by the Labor Code or is legally self-insured pursuant to Labor Code section 3700 et seq.?

Yes  No Has your firm or any of its owners or officers ever been convicted of a crime involving the awarding of a contract of a government construction project, or the bidding or performance of a government contract?

Yes  No Has any contractor's license held by your firm, or its responsible managing employee ("RME") or responsible managing officer ("RMO") been suspended or revoked at any time in the last five years?

Yes  No Has your firm registered using the Department of Industrial Relation's Public Works Contractor Online Application System as required by SB 854 (CA Labor Code Section 1725.5)?

Contractor Registration Number \_\_\_\_\_  
Expiration Date \_\_\_\_\_

## Application Approval

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Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for rejection or return:

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