



Henry County Water Authority

REQUIREMENTS FOR PLACEMENT ON HCWA APPROVED CONTRACTORS LIST

NAME OF COMPANY: _____

ADDRESS: _____

PHONE: _____ FAX: _____

MOBILE: _____ E-MAIL: _____

CHOOSE ONE: () CORPORATION () PARTNERSHIP () INDIVIDUAL

DATE ORGANIZED: _____

TYPE OF WORK: () WATER LINE INSTALLATION () SEWER LINE INSTALLATION

PERSONNEL: Name, title and telephone number of key personnel and years of experience in water and sewer:

REFERENCES: Include a minimum of 3 customer names and 3 inspecting municipalities. Include telephone numbers, addresses and recommendation letters from each of these references.

PROJECTS COMPLETED WITH IN THE LAST THREE YEARS: Include contact person's name and telephone number. Attach additional sheets, if necessary.

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STATE UTILITY CONTRATOR LICENSE NUMBER: _____

COMPETENT PERSON (TRENCHING/EXCAVATION): _____

NAME OF INSURANCE COMPANY: _____

TYPES OF COVERAGE: _____

MAXIMUM COVERAGE: _____ BONDING CAPACITY: _____

****YOU MUST ATTACH A COPY OF CURRENT INSURANCE CERTIFICATE AND UTILITY CONTRACTOR'S LICENSE. ****

SIGNATURE OF REPRESENTATIVE

TITLE

NOTE: Once the requirements mentioned in the Approved Contractor's application have been met, the contractor may be temporarily approved to install water distribution and sanitary sewer infrastructure that will become a part of the Henry County Water Authority's system. Upon completion of each of your first three jobs, you will be subject to re-evaluation. You will also be reviewed on an annual basis.

Updated information pertaining to insurance and Utility Contractor Licenses will be required upon expiration of each.