



Contractor's Application for REO Rehabilitation Work

Company Information

Company Name: _____

Name of Owner/Principal: _____

Physical Address: _____

City, State, Zip: _____ County: _____

Business Phone: _____ Website: _____

Tax ID # _____ Contractor's License # _____

Primary Contact Information

Name: _____

Business Phone: _____ Cell Phone: _____

Email: _____

Work Experience/Specialty (select all that apply)

- | | | |
|---|-------------------------------------|--|
| <input type="checkbox"/> General Construction | <input type="checkbox"/> Demolition | <input type="checkbox"/> Interior Cleanout |
| <input type="checkbox"/> Renovation | <input type="checkbox"/> Electrical | <input type="checkbox"/> Tree Removal |
| <input type="checkbox"/> Repair & Maintenance | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Landscaping |
| <input type="checkbox"/> Mold Remediation | <input type="checkbox"/> HVAC | <input type="checkbox"/> Grass Mowing |
| <input type="checkbox"/> Asbestos Abatement | <input type="checkbox"/> Roofing | |
| <input type="checkbox"/> Hazardous Materials | <input type="checkbox"/> Painting | |

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Counties in Which You Prefer to Work (select all that apply)

- | | | | | |
|------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------|
| <input type="checkbox"/> Barbour | <input type="checkbox"/> Grant | <input type="checkbox"/> Logan | <input type="checkbox"/> Nicholas | <input type="checkbox"/> Summers |
| <input type="checkbox"/> Berkeley | <input type="checkbox"/> Greenbrier | <input type="checkbox"/> McDowell | <input type="checkbox"/> Ohio | <input type="checkbox"/> Taylor |
| <input type="checkbox"/> Boone | <input type="checkbox"/> Hampshire | <input type="checkbox"/> Marion | <input type="checkbox"/> Pendleton | <input type="checkbox"/> Tucker |
| <input type="checkbox"/> Braxton | <input type="checkbox"/> Hancock | <input type="checkbox"/> Marshall | <input type="checkbox"/> Pleasants | <input type="checkbox"/> Tyler |
| <input type="checkbox"/> Brooke | <input type="checkbox"/> Hardy | <input type="checkbox"/> Mason | <input type="checkbox"/> Pocahontas | <input type="checkbox"/> Upshur |
| <input type="checkbox"/> Cabell | <input type="checkbox"/> Harrison | <input type="checkbox"/> Mercer | <input type="checkbox"/> Preston | <input type="checkbox"/> Wayne |
| <input type="checkbox"/> Calhoun | <input type="checkbox"/> Jackson | <input type="checkbox"/> Mineral | <input type="checkbox"/> Putnam | <input type="checkbox"/> Webster |
| <input type="checkbox"/> Clay | <input type="checkbox"/> Jefferson | <input type="checkbox"/> Mingo | <input type="checkbox"/> Raleigh | <input type="checkbox"/> Wetzel |
| <input type="checkbox"/> Doddridge | <input type="checkbox"/> Kanawha | <input type="checkbox"/> Monongalia | <input type="checkbox"/> Randolph | <input type="checkbox"/> Wirt |
| <input type="checkbox"/> Fayette | <input type="checkbox"/> Lewis | <input type="checkbox"/> Monroe | <input type="checkbox"/> Ritchie | <input type="checkbox"/> Wood |
| <input type="checkbox"/> Gilmer | <input type="checkbox"/> Lincoln | <input type="checkbox"/> Morgan | <input type="checkbox"/> Roane | <input type="checkbox"/> Wyoming |

Please provide a brief description of your experience in the field of residential rehabilitation.

Submit both pages of this application and the required documentation listed below via email to:

REORFP@wvhdf.com

Subject: Contractor's REO Application

Required Documentation to be submitted with this Application:

1. Current Contractor's license from the State of West Virginia
2. Proof of current liability and workers' compensation insurance coverage
3. Copies of any licensures/certifications that you maintain relating to residential construction

The West Virginia Housing Development Fund's review of your application in no way guarantees an award of any contract for work. The Fund reserves the right to accept/deny any application if, in the sole discretion of the Fund, the Contractor does not have the capability to fully perform or lacks the integrity and reliability necessary to assure good-faith performance.