



SONOMA-MARIN AREA RAIL TRANSIT DISTRICT
CA PUBLIC CONSTRUCTION COST ACCOUNTING ACT
INFORMAL BIDDING PROCESS

REGISTRATION APPLICATION
FISCAL YEAR 2020

Name of Company: \_\_\_\_\_

Contact Person (Name and Title): \_\_\_\_\_

Street Address, City, State & Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

DIR Contractor Registration No. \_\_\_\_\_

CA Contractors License No(s): \_\_\_\_\_ Classifications (Select All That Apply):

- Checkboxes for license classifications: A, B, C-8, C-10, C-13, C-21, C-27, C-31, C-33, C-45, HAZ, Other

Categories of Work in which you are Interested: \_\_\_\_\_

- 1. How many years has your organization been in business in California as a contractor under your present business name and license number? \_\_\_\_\_ Years
2. At any time in the last five years, has your firm had a construction contract with a public agency?
3. At any time in the last five years, has your firm filed for bankruptcy?
4. At any time in the last five years, has your firm been denied an award of a construction contract based on a finding by a public agency that your company was not a responsible bidder?
5. At any time in the last five years, has any insurance company, for any form of insurance, refused to renew an insurance policy for your firm?
6. All firms working on the SMART right-of-way are required to obtain at least \$2,000,000 in Railroad Protective Liability Insurance. Is your firm willing to acquire the necessary coverage if a contract is awarded to you?

I certify that to the best of my knowledge, the elements of information provided above are accurate and true, as of this date. I am properly licensed and skilled to perform the types of work selected above and able to secure the proper insurance and bonds to perform the work. My company shall comply with all SMART District, State and Federal Requirements.

PRINTED NAME

SIGNATURE

Title

Date