

REQUEST TO BE INCLUDED ON THE PROFESSIONAL SERVICES ROSTER

Purchasing Office

P.O. Box 2098 Everett, WA 98213 Phone: (425) 385-4180 Fax: (425) 385-4172

FOR CONSIDERATION ON SPECIAL PROFESSIONAL SERVICES PROJECTS COMPLETE THIS FORM AND MAIL TO THE ABOVE ADDRESS.

Name of Company			P	none #		
Address		Fax #				
City						
Name of Contact Person_						
Federal Tax Identification #						
Type of Organization: [] Individual [] Partnership [] Corporation List principals: (owners, partners, corporate officers) Name & Title						
Name & Title						
Name & Title Are any of the Principals or their spouses employed by the Everett School District #2?						
, i	[]Yes	[] No				
How long has your company been in business?						
PREVIOUS EXPERIENCE – List other school districts or state agencies:						
District/Agency	Description	of Servic	ce	Date Performed	Amount	

Continued on Reverse Side

EVERETT SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY AND AFFIRMATIVE ACTION EMPLOYER. Applicant will comply with all City, State and Federal Government regulations regarding equal employment opportunity and affirmative action.

Mark with an X those services you are equipped, experienced and qualified to perform:						
[]	Architecture	[]	Engineering Structural			
[]	Architecture, Landscaping	[]	Engineering, Traffic/Transportation			
[]	Asbestos Abatement Consultant	[]	Engineering, Value			
[]	Construction Testing	[]	Environmental Monitoring			
[]	Cost Estimating:	[]	Hazardous Waste Services			
[]	\cdot Roofing	[]	Inspection Services			
[]	· Commissioning HVAC Systems	[]	Survey			
[]	· A.D.A. Upgrades	[]	Testing & Balance of HVAC			
[]	· Constructability Reviews	[]	Testing & Concrete			
[]	Engineering, Civil	[]	Testing, Soil			
[]	Engineering, Electrical	[]	Other:			
[]	Engineering, Geo-Technical	[]				
[]	Engineering, Mechanical	[]				
[]	Engineering, Signal Systems	[]				
Comments or explanations, if any, on areas of specialization:						
Applicant agrees to provide a Certificate of Insurance naming the Everett School District as an additional insured, prior to commencement of any project.						
Applicant agrees to comply with all City, State and Federal regulations relative to public works projects.						
I certify that the information supplied herein is correct and agree to the terms and conditions contained herein.						
Signature			Date			
Printed Name			Title			