

CONTRACTOR APPLICATION



NORTHLAND NEIGHBORHOODS, INC

4420 NE CHOUTEAU TRAFFICWAY, SUITE 100, KANSAS CITY, MO 64117

OFFICE: 816-454-2000

WWW.NNI.ORG

FAX: 816-454-1747

COMPANY INFORMATION

NAME	
TITLE	
COMPANY NAME	
STREET ADDRESS	
CITY, STATE, ZIP CODE	
WORK PHONE	
CELL PHONE	
FAX	
EMAIL ADDRESS	

COMPANY SPECIALTIES

MINIMUM OF 7 REFERENCES

(No more than two Individuals; Please list Businesses, Contractors, Development Companies, City Departments you have worked with in the past 6 months)

NAME:	
COMPANY:	
CONTACT INFO:	
NAME:	
COMPANY:	
CONTACT INFO:	
NAME:	
COMPANY:	
CONTACT INFO:	
NAME:	
COMPANY:	
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NAME:	
COMPANY:	
CONTACT INFO:	
NAME:	
COMPANY:	
CONTACT INFO:	
NAME:	
COMPANY:	
CONTACT INFO:	

TWO ADDRESSES WHERE PREVIOUS CONSTRUCTION WORK CAN BE VIEWED (PREFER EXTERIOR)

NAME:	
ADDRESS:	
CONTACT INFO:	
NAME:	
ADDRESS:	
CONTACT INFO:	

AGREEMENT AND SIGNATURE

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a contractor, any false statements, omissions, or other misrepresentations made by me on this application may result in removal from Northland Neighborhoods, Inc. approved contractor list.

***Contractors must have all documentation on file with the NNI prior to having bids awarded**

NAME (PRINTED)	
SIGNATURE	
DATE	

REQUIRED DOCUMENTS

Execution of a Repair and Maintenance Agreement provided by NNI	
Execution of a Notarized Contractor Affidavit pertaining to RSMo 285.530, provided by NNI	
Current Insurance Policy detailing a minimum of \$1,000,000 per occurrence naming NNI as the Certificate Holder , and \$1,000,000 aggregate and Workers' Compensation Insurance with Employers Liability of \$100,000 accidental.	
Current Kansas city Missouri Business License	
Completed W-9	
EPA Lead Based Paint Renovation & Repair Certificate	

OUR POLICY

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.