



Northland Neighborhoods, Inc.

4420 N Chouteau Trfy, Kansas City, MO 64117

Phone: (816) 454-2000 Fax: (816) 454-1747

Contractor Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Company Name: _____

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Work Phone: _____ Email: _____

Cell Phone: _____ Fax: _____

Types of Services Performed

Please check all that are applicable:

- HVAC Roof Gutters Siding Paint
- Electrical Plumbing Concrete Carpentry Windows
- Water management remediation General contractor who may subcontract skilled licensed personnel as needed
- Other: _____

References

Please list at least seven professional references. (No more than two individuals. Please list businesses, contractors, development companies, or city departments you have work with in the past 6 months)

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Work Examples

Please list three addresses where previous construction work can be viewed (Prefer exterior work done in the last 6 months)

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Disclaimer & 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 statement, 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 NNI prior to having bids awarded.**

Printed Name: _____
 Signature: _____ Date: _____

Required Documents

- Copy of Drivers License
- Completed W-9 Form
- Lead-Based Paint Certification
- A copy of your current Kansas City Missouri Business License
- A Certificate of insurance reflecting liability insurance of \$1,000,000 per incidence and \$1,000,000 annual aggregate, listing NNI as additional insured.
- Auto liability insurance certificate
- Workers compensation certificate
- Special Certification (if applicable)
 - Section 3, MBE, WBE or DBE

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.