



Dear Potential Contractor;

Thank you for expressing an interest in the Single Family Rehabilitation (SFR) and/or Emergency Home Repair (EHR) Programs administered by the Denver Urban Renewal Authority (DURA).

Enclosed is an application along with DURA's General Specifications for Rehabilitation. Please take some time to read over these documents to ensure this is a program you are interested in.

If you have been requested by a specific homeowner to bid rehabilitation work, please have your application completed with the items mentioned below by the time the bids are due. The completed application must be received and approved by DURA prior to the bid opening in order for you to be considered a valid bidder.

The following items are required to participate in our **SFR** program. Please provide us with copies of the following along with you Contractor Application.

- 1. General Contractors License A,B or C issued by the City and County of Denver**
- 2. Workers' Compensation Insurance**
- 3. General Liability Insurance (Certificate of Insurance)**
- 4. Proof of Vehicle Insurance**
- 5. Supervisors Certificate**
- 6. HUD Lead Safe Work Practices Certificate**  
(Please provide a certificate for each person who will be working on DURA projects)

The following items are required to participate in our **EHR** program. Please provide us with copies of the following:

- 1. General Contractors License A, B or C issued by the City and County of Denver and/or a Sub-Contractors License (please specify trade)**
- 2. Workers' Compensation Insurance**
- 3. General Liability Insurance (Certificate of Insurance)**
- 4. Proof of Vehicle Insurance**

If you are approved, we do our utmost to provide each contractor an opportunity to bid on rehabilitation jobs as they become available.

If you have any questions please don't hesitate to call me at the above number. I look forward to hearing from you in the near future.

Sincerely,

*Brenda L. Bruce*

Sr. Loan Specialist  
Single Family Rehabilitation Program

**SECTION 3 BUSINESS CERTIFICATION**

The bidder/contractor certifies as part of its bid or contract that it:

(check applicable box)

- Is a Section 3 business as indicated below:
- Category 1 Business: An entity owned by 51% or more Section 3 residents.
- Category 2 Business: An entity whose permanent full time employees include people, at least 30% of whom are currently Section 3 residents or within 3 years of the date first employed, with the business, were Section 3 residents.
- Category 3 Business: An entity that evidences a commitment to sub-contract in excess of 25% of the dollar amount of all sub-contracts to be awarded to Section 3 businesses.
- Not a section 3 Business.

A Section 3 resident is defined as a public housing resident or an individual who resides within the City and County of Denver and is a low-income person. Low income is defined as 80% of area median income and very low income is defined as 50% of area median income. Low income "person" may include families as well.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**CONTRACTOR'S APPLICATION FOR BID APPROVAL**

COMPANY NAME: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_

HOW LONG IN BUSINESS: \_\_\_\_\_ PHONE: \_\_\_\_\_ CELL/PAGER \_\_\_\_\_

EMPLOYEE TAX ID# \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_

CONTRACTOR ETHNICITY: \_\_\_\_\_

**OFFICERS AUTHORIZED TO EXECUTE DOCUMENTS & SIGN FOR CHECKS:**

Printed Name	Signature	Title
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Printed Name	Signature	Title
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**LIST THREE WORK REFERENCES:**

Name	Address	Phone #
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Name	Address	Phone #
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Name	Address	Phone #
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**LIST THREE SUB-CONTRACTORS YOU REGULARILY USE (for General Contractors Only):**

Name	Address	Phone #
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Name	Address	Phone #
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Name	Address	Phone #
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**LIST THREE MATERIAL SUPPLIERS YOU REGULARILY USE:**

Name	Address	Phone #
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Name	Address	Phone #
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Name	Address	Phone #
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NOTE: By signing this application, you are authorizing DURA to verify the information given and acknowledging receipt of General Conditions of the Contract and DURA Specifications for Rehabilitation.

Date	Signature of Applicant(s)	Title
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Date	Signature of Applicant(s)	Title
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TO WHOM IT MAY CONCERN:

I/We have applied to participate as a General Contractor through DENVER URBAN RENEWAL AUTHORITY and hereby authorize the verification of information furnished in support of the application.

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Tax ID# or Social Security #

\_\_\_\_\_  
Company's Complete Address

\_\_\_\_\_  
Owner's Signature and Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's Signature and Title

\_\_\_\_\_  
Date

**DENVER URBAN RENEWAL AUTHORITY**

*1555 California Street, Suite 200*

*Denver, Colorado 80202*

*(303)534-3872 fax(303)534-7303*

Dear Denver Urban Renewal Authority:

Please fill in the appropriate blanks on this form and return. If any changes are necessary in the future, please notify us as soon as possible.

**Only the following person(s) are authorized to execute documents:**

_____ PRINTED NAME	_____ SIGNATURE
_____ PRINTED NAME	_____ SIGNATURE
_____ PRINTED NAME	_____ SIGNATURE

**Only the following person(s) are authorized to sign for or receive payments:**

_____ PRINTED NAME	_____ SIGNATURE
_____ PRINTED NAME	_____ SIGNATURE
_____ PRINTED NAME	_____ SIGNATURE

\_\_\_\_\_  
**COMPANY NAME**

\_\_\_\_\_  
BY TITLE DATE