

RENOVATION CONTRACTOR APPLICATION

Contractor Requirements & Checklist

Contractor Name	
Contact Name	
Phone Number	
Lender	
Loan Officer	

- Completion and acceptance of GWB's Contractor Profile and Registration form.
 - A minimum of 5 years of relevant experience is required
 - Full list of all principals owning 10% or more of the company including socials (attach separate page if needed)
 - All questions answered in the builder disclosure section
 - All questions answered in the licensing section
 - General authorization letter completed for all principals owing 10% or more
- Copy of contractor's commercial insurance policy or policies indicating an acceptable level of general liability coverage.
- Copy of any/all licenses or certifications required by any jurisdictions (state, county, city, etc.) in which business is conducted.
- Copy of Lead Paint Certification, if any
- Reference letter from previous client
- W-9

Send Documents To:

BuilderApprovals@goldwaterbank.com

Contractor registration can take up to two weeks. Once the builder is registered, notification will be sent by the Construction Lending Department.

Contractor Profile and Registration

CONTRACTOR AND COMPANY INFORMATION

Builder Name		Tax ID Number	
Company Legal Name			
DBA(s), if applicable			
Address			
City	State	Zip	
Office Phone:	Fax	Cell	
Email			
Date Established		Is Your Company Incorporated?	Years in Business
Organization Type	<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> LLC		

AFFILIATED BUSINESS

Company Name	Type of Business	Owner(s) Full Legal Name	Ownership %	Yrs in Business

Real estate investment groups, Title Co, Appraisers/Inspector, Mortgage Broker, Mortgage Company, Surveyor. (Use separate application of additional companies/owners). Submit documentation of all affiliate Companies/Agreement with Registration Form. Please put N/A if there are none.

LIST OF ALL INDIVIDUALS WHO OWN 10% OR MORE OF THE COMPANY (ATTACH SEPARATE PAGE IF NEEDED)

Owner(s) Full Legal Name	Title	Social Security #	Percentage of Ownership	Married	Single	Separated

If in business under a different name in the last 5 years, please indicate:

EXPERIENCE

Provide on information on at least three projects completed by you or your organization within the last year.

Project Name	Project Location	Contact	Contract Amounts	Date of Completion

REFERENCES					
Supplier/ Subcontractor				Type	
Contact		Phone		Fax	
Address					
Supplier/ Subcontractor				Type	
Contact		Phone		Fax	
Address					
Supplier/ Subcontractor				Type	
Contact		Phone		Fax	
Address					
Financial Institution				Contact	
Phone				Fax	
Address					
Estimated Volume Financed					

INSURANCE			
General Liability Insurance Carrier		Phone	
Agent		Policy #:	
Expiration Date		Coverage Amt	
PLEASE ANSWER THE FOLLOWING QUESTIONS			
Have you, the company or any of the principals, declared Bankruptcy within the last 10 years?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you, the company, or any of the principals, currently a Defendant in any Suits or Legal Actions?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you, the company, or any of the principals, have any outstanding judgments against them?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you, the company or any of the principals, ever had your General Contractor's License revoked or suspended?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
IF YOU HAVE ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, PLEASE ATTACH A LETTER OF EXPLANATION.			

Licensing		
Are you required to have a state issued contractor license for any areas in which you work? If yes, attach your license.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you required to have a county issued contractor license for any areas in which you work? If yes, attach your license(s).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you required to have a locality issued contractor license for any areas in which you work? If yes, attach your license.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you certified to work on homes with lead based paint and asbestos? If yes, attach your certification for both.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any types of work (Ex: Electrical, HVAC, plumbing etc.) that you cannot perform or that must be subcontracted because you are not licensed or are not insured to perform that type of work? If yes, please list below:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you required to have a license for any specific types of work that you perform? (Ex: Electrical, HVAC, plumbing etc.) If yes, please attach your license.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you limited to the total bid amount of a project due to licensing or for any other reason? If yes, please specify the maximum value you are licensed to bid on below:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any other restrictions on the work that you can perform not covered by the preceding questions? If so, please specify below:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please submit the following documentation along with this completed Contractor Profile Form:

1. Completion and acceptance of GWB's Contractor Profile and Registration form.
 - a. A minimum of 5 years of relevant experience is required
 - b. Full list of all principals owning 10% or more of the company including socials (attach separate page if needed)
 - c. All questions answered in the builder disclosure section
 - d. General authorization letter completed for all principals owning 10% or more
2. Copy of contractor's commercial insurance policy or policies indicating an acceptable level of general liability coverage.
3. Copy of any/all licenses required by the state in which business is conducted.
4. W-9

ACKNOWLEDGMENTS

I certify that the above information is true and correct to the best of my knowledge. I understand that any false information, misrepresentation, or omission of the facts may disqualify me/the company from participation in Goldwater Bank N.A. renovation programs and is grounds for immediate revocation of my/the company's approval to participate in Goldwater Bank N.A.'s renovation programs.

(Contractor Name)

(Authorized Signature)

By: _____
(Printed Name and Title)

General Authorization Letter

To Whom It May Concern:

I have applied to Goldwater Bank N.A., and/or assigns, for registration as a participating contractor in the Goldwater Bank N.A., renovation programs and hereby authorize you to release requested information which may include information deemed necessary in connection with a consumer credit report.

The information is for the confidential use of Goldwater Bank N.A., and/or assigns, in determining my credit worthiness as a licensed contractor or to confirm information I have supplied.

A fax copy of this authorization may be deemed to be equivalent to the original and may be used as a duplicate original. The original signed form is maintained by Goldwater Bank N.A., and/or assigns.

Social Security Number

Date of Birth

Address

City, State Zip

Printed Name

Signature

Date

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	
	<input type="checkbox"/> Exempt payee	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number									

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.