

**CITY OF VISTA
REDEVELOPMENT AND HOUSING DIVISION**

RESIDENTIAL REHABILITATION LOAN PROGRAM

Name of Firm:	
Street Address:	
City:	
Zip Code:	
Telephone #	Fax #
Check appropriate form of ownership:	
<input type="checkbox"/> Corporation	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Contractor State License Number:	Expiration date:
HIC certified? <input type="checkbox"/> yes <input type="checkbox"/> no	
Is there an RMO or RME on your CSLB license? <input type="checkbox"/> yes <input type="checkbox"/> no	
If yes, name:	
What type of projects will you bid on?	
<input type="checkbox"/> Single family home	<input type="checkbox"/> Mobile homes
Are you bilingual? <input type="checkbox"/> yes <input type="checkbox"/> no	
If yes, what language(s) do you speak?	

The City of Vista is required to ask for a voluntary indication of your ethnic origin. Please check one of the following:

Asian/Islander Black Hispanic White Native American

I _____ (please print name), wish to have my company's name listed as a contractor interested in participating in the City of Vista's Residential Rehabilitation Loan Program. **I understand that this list does not imply endorsement for any contractors, merely that names on the list have expressed interest in bidding rehabilitation jobs and meeting the minimum requirements of the program.**

Contractor's Signature

date

Please return this form along with evidence of Worker's Compensation (or exemption), certificate of Liability Insurance and evidence of City of Vista Business License (this license can be obtained at awarding of contract) to:

**City of Vista, Housing Division
Teresa Graham, Senior Housing Specialist
760-726-1340 ext 1101
200 Civic Center Drive
Vista CA 92084**

Or fax at: (760) 639-6188