



SUBCONTRACTOR PRE-QUALIFICATION PACKAGE

Project: _____

Subcontractor: _____

DOCUMENTS ARE REQUIRED PRIOR TO THE AWARD OF CONTRACT

Please verify that the following are included in your Pre-Qualification response:

- Vendor Questionnaire (attached)
- Form W-9 (attached)
- Letter of Authorization (sample attached)
- Safety Questionnaire (attached)
- Insurance Addendum listing specific Insurance Requirements (attached)
 - Include a sample Insurance Certificate
- Bank Reference
 - Letter from your baker indicating the length of the banking relationship, the performance of the accounts, amount of Line of Credit and amount used, and existing backlog
- Bonding Agent/Surety Reference
 - Letter from Bonding Agent/Surety, including the name of surety, length of relationship with name Surety, size of jobs successfully completed, present Bonding Line of Credit (single job limit as well as aggregate work program), and existing backlog and bond availability
- Contractor Score Certification - information may be found at www.contractorscore.net as well as www.foushee.com

The undersigned company Officer hereby warrants that the information contained herein is complete, true, accurate and current as of the date submitted. Since this information will be used in our selection process, any errors, inaccuracies or exclusions may be grounds for disqualification of your proposal(s) and/or breach of awarded contract(s).

Name: _____

Signature: _____

Title: _____

Date: _____



**TO EXPEDITE YOUR CONTRACT
PLEASE RETURN ASAP**

NEW VENDOR QUESTIONNAIRE

In order to process your **SUBCONTRACT/PURCHASE ORDER**, we need further information about your company. Kindly fill in the following requested information and return by email to lalipao@foushee.com or by fax to **425-378-2161** as soon as possible. Thank you for your assistance.

Company Name (please show legal company name, such as incorporated or limited partnership, etc.)

Street Address (PO Box if applicable) **Zip** (if different) **City/State/Zip**

Payment Address (if different from purchase address) **City/State/Zip**

Email Address

Accounting Contact **Title**

Phone Number (area code) **Fax Number** (area code)

Accounting Fax Number (if different)

Please select one: Corporation LLC Partnership Other

Contractor's Registration No: _____

UBI Number (Resale): _____

Federal Tax ID Number: _____
(for individuals and sole proprietors, this is your Social Security Number)

Payment Terms (select one): No Discount 1% 2% 3% Other: _____
(Payment is made in the month following the billed month - 25th for non-discounts & 10th for discounts)

Union or Non-Union: _____

Signature: _____ Date: _____

Title: _____

- Office Use Only:
Vendor should be set up at:
- 1) Subcontract _____
 - 2) Purchase Order _____
 - 3) Other _____

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.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a “saving clause.” Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called “backup withholding.” Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the “Name” line. You may enter your business, trade, or “doing business as (DBA)” name on the “Business name/disregarded entity name” line.

Partnership, C Corporation, or S Corporation. Enter the entity's name on the “Name” line and any business, trade, or “doing business as (DBA) name” on the “Business name/disregarded entity name” line.

Disregarded entity. Enter the owner's name on the “Name” line. The name of the entity entered on the “Name” line should never be a disregarded entity. The name on the “Name” line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the “Name” line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the “Business name/disregarded entity name” line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the “Name” line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the “Name” line is an LLC, check the “Limited liability company” box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter “P” for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter “C” for C corporation or “S” for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the “Name” line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the “Name” line.

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/disregarded entity name" line.

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
 2. The United States or any of its agencies or instrumentalities,
 3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
 4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
 5. An international organization or any of its agencies or instrumentalities.
- Other payees that may be exempt from backup withholding include:
6. A corporation,
 7. A foreign central bank of issue,
 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
 10. A real estate investment trust,
 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
 12. A common trust fund operated by a bank under section 584(a),
 13. A financial institution,
 14. A middleman known in the investment community as a nominee or custodian, or
 15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 7 ²

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see *Exempt Payee* on page 3.

Signature requirements. Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
5. Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.



Foushée and Associates, Inc. requires that Contracts, Change Orders, Lien Releases, and Subcontractor Application for Payment forms be signed by a corporate officer, partner, or owner of the company.

If any individual is to sign on behalf of your company who is not an owner or officer, Foushée must have a Letter of Authorization on file for that individual.

Below is a sample. When completing the form, please make sure that:

1. It is on company letterhead.
2. It is signed by an owner or officer of the company.
3. The individual's signature, as well as title and name, are on the document.

SAMPLE LETTER OF AUTHORIZATION

To Whom It May Concern:

The individual(s) listed below is authorized to sign Lien Releases, Subcontractor Applications for Payment, Contracts, and Change Orders on behalf of: _____ (Company name).

Name: _____

Title: _____

Signature of authorized individual: _____

Name: _____

Title: _____

Signature of authorized individual: _____

Sincerely,

Name
Title of Corporate Officer, Partner, or Owner



STATE OF
WASHINGTON

RESELLER PERMIT

Washington State Department of Revenue

PO Box 47476 • Olympia, WA 98504-7476 • 1-800-647-7706

Issued to:
600 259 643
FOUSHEE & ASSOCIATES COMPANY INC
PO BOX 3767
BELLEVUE WA 98009 3767

Permit Number: A16 3953 13

Effective Date: 01-01-2012

Expiration Date: 12-31-2013

Business Activity:
INDUSTRIAL BUILDING CONSTRUCTION (PT)

This permit can be used to purchase:

- Merchandise and inventory for resale without intervening use
- Ingredients, components, or chemicals used in processing new articles of tangible personal property produced for sale
- Feed, seed, seedlings, fertilizer, and spray materials by a farmer
- Materials and contract labor for retail/wholesale construction
- Items for dual purposes (see Purchases for Dual Purposes on back)

This permit cannot be used to purchase:

- Items for personal or household use
- Promotional items or gifts
- Items used in your business that are not resold, such as office supplies, equipment, tools, and equipment rentals
- Materials and contract labor for public road construction or U.S. government contracting (see Definitions on back)
- Materials and contract labor for speculative building

This permit is no longer valid if the business is closed.

The business named on this permit acknowledges:

- It is solely responsible for all purchases made under this permit
- Misuse of the permit:
 - Subjects the business to a penalty of 50 percent of the tax due, in addition to the tax, interest, and penalties imposed (RCW 82.32.291)
 - May result in this permit being revoked

Notes (optional): _____

Important: The Department of Revenue may use information from sellers to verify all purchases made with this permit were qualified.

Director, Department of Revenue

Reseller: Keep this original permit on file. Provide copies to sellers from which you make purchases.



SUBCONTRACTOR'S SAFETY QUESTIONNAIRE

Company Name: _____

Date: _____

1. Please list your firm's Worker's Compensation Modification rates for the three (3) most recent years.

20____ 20____ 20____

2. Please submit a copy of your most recent Department of Labor and Industries Worker's Compensation Rate notice.

3. Please use your firm's most recent three (3) years OSHA 300 and 301A Logs to complete the following information.

	20____	20____	20____
(a) Total recordable cases:	_____	_____	_____
(b) Cases involving lost workdays:	_____	_____	_____
(c) Number of lost workdays:	_____	_____	_____
(d) Number of fatalities:	_____	_____	_____
(e) Total company hours reported:	_____	_____	_____

4. Do you have a written accident prevention program? Yes No
If yes, please submit a copy for record filing.

5. Do you maintain a written site specific safety plan covering your scope of work? Yes No
(i.e. fall protection, excavation and trenching, confined space entry)

6. Do you have a written substance abuse program? Yes No

7. Do you have a safety orientation program for new hires: Yes No

8. Do you conduct employee safety training? Yes No

9. Do you conduct, document, and maintain records of safety meetings? Yes No
If yes, how often?

Weekly Biweekly Monthly

10. Do you use sub-tier subcontractors in the performance of your work? Yes No

11. Do you require your sub-tier subcontractors to attend weekly safety meetings? Yes No



SUBCONTRACTOR'S SAFETY QUESTIONNAIRE - PAGE 2

12. Do you review and/or monitor your sub-tier subcontractor's safety meetings? Yes No

13. Please list any OSHAWISHA serious, repeat, willful, or criminal citations and any MSHA significant and substantial (S&S) citations your firm has had in the last three (3) years. Please describe in detail. Use additional pages if necessary.

14. Do your sub-tier subcontractors have a written safety program and site specific safety plan? Yes No

15. Do you conduct project safety inspections? Yes No

Who is responsible for conducting the inspections?

Name: _____ Title: _____

16. Please describe your disciplinary action procedures that would be used when you detect a deficiency in your sub-tier subcontractor's safety performance. Attach examples of written documents.

17. Please list your Company's safety personnel along with his/her experience.

Name: _____ Title: _____

Experience:

Name: _____ Title: _____

Experience:



SUBCONTRACTOR'S SAFETY QUESTIONNAIRE - PAGE 3

18. Are you aware of Foushée's Liability insurance coverage requirements? Yes No

If no, would you like to pre-qualify? Yes No

If yes, do you have a current certificate of insurance on file with us? Yes No

I do hereby agree to accept full responsibility for enforcing the provisions contained in the accident prevention manual submitted with this questionnaire, to comply with all applicable safety and health regulations pertaining to work performed in conjunction with this submittal for Foushée and Associates, and promptly correct any unsafe condition identified in the place of employment.

Name of person completing this form: _____

Signature: _____ Date: _____

Title: _____



INSURANCE ADDENDUM - REQUIRED INSURANCE COVERAGE

This contract requires that adequate insurance coverage be carried to protect the OWNER, CONTRACTOR and SUBCONTRACTOR from claims for damages because of bodily injury including death and/or property damage which may arise from and during operations under this Contract, whether such operations be by the CONTRACTOR, SUBCONTRACTOR, or anyone directly or indirectly employed by either of them and from claims under Worker's Compensation Acts.

The SUBCONTRACTOR shall not commence work under this Contract until insurance required hereunder has been obtained and Certificates of Insurance and the required Endorsements have been filed with CONTRACTOR. Except for Worker's Compensation and Professional Liability, the policies shall include and the certificate of insurance shall designate CONTRACTOR and OWNER as additional insureds, with coverage applying on a primary and non-contributory basis.

LIMITS and COVERAGES

Minimum limits required as follows:

1.)	Commercial General Liability	
	(a) Combined single limit each occurrence	\$1,000,000
	(b) Products and completed operations aggregate	\$2,000,000
	(c) General Aggregate (per project)	\$2,000,000
2.)	Automobile Bodily Injury and Property Damage Liability	
	(a) Combined single limit each accident	\$1,000,000
3.)	Contractor's Pollution Liability (including "mold")	\$1,000,000
	(Required if subcontract includes any remediation of pollutants/ hazardous substances OR mechanical work)	
4.)	Worker's Compensation	STATUTORY
	Employers Liability or Stop Gap	\$1,000,000
5.)	Architects & Engineers/ Contractors Professional Liability	\$1,000,000
	(Required if subcontract includes any design or design/ build work)	
6.)	Excess or Umbrella Liability	
	(a) Bodily Injury and Property Damage per Occurrence	\$1,000,000
	(b) Bodily Injury and Property Damage Aggregate	\$1,000,000

Commercial General Liability

Commercial General Liability coverage will be written on an industry standard ISO Commercial General Liability Occurrence form (CG 00 01) and shall include the following coverage extensions:



Per Project Aggregate (CG 25 03)
Additional Insured (CG 20 10 11 85) **OR**;
Additional Insured (CG 20 10 10 93 or later) **AND** Additional Insured (CG 20 37 07 04) **OR**;
A Blanket Additional Insured form that provides additional insured status for both ongoing and completed operations.

The requirement to add CONTRACTOR and OWNER as additional insured specifically includes completed operations for the period coverage is required to be in force under this subcontract. The policy and/or endorsement shall contain no special limitations on the scope of protection afforded to the additional insureds and all endorsements are subject to CONTRACTOR's approval.

Subcontractor's commercial general liability insurance shall be primary as respects CONTRACTOR and OWNER, and any other insurance maintained by CONTRACTOR and OWNER shall be excess and not contributing insurance with SUBCONTRACTOR's insurance. All non-standard coverage exclusions or limitations must be disclosed on the certificate including, but not limited to "mold", professional liability, residential construction, broad form property damage limitations, or any other exclusion or limitation not included within the standard ISO policy form.

Automobile Liability

Subcontractor's Auto Liability insurance shall be written on an industry standard Business Auto Liability policy form (CA 00 01). Coverage will include owned, non-owned and hired automobiles.

Contractors Pollution Liability

Coverage will include "mold" as defined pollutant if covering mechanical work.

Workers Compensation and Employers Liability

Subcontractor's Worker's Compensation insurance shall be written on an industry standard Worker's Compensation and Employer's Liability policy form (WC 00 00 00). Where applicable, Subcontractor shall furnish United States Longshoremen's and Harbor Worker's Act Insurance at statutory limits including coverage B-Employers Liability (maritime) with limits not less than required by the main contract but in no event less \$1,000,000. In monopolistic states coverage shall be confirmed through the applicable state agency as being in-force, or that the SUBCONTRACTOR is approved as self-insured employer by the state. In the case of any self insured employer, the waiver of subrogation shall apply as respects any excess coverage that may be in force along with any claims within any self insured retention.

Architect & Engineering/ Contractors Professional Liability

Coverage will include professional services performed by or on behalf of the SUBCONTRACTOR. Any definition of covered professional services will be broad enough in scope to include all services performed by SUBCONTRACTOR under this agreement.

Property Insurance

Subcontractor shall provide insurance against any losses that may occur to SUBCONTRACTOR's tools and equipment whether owned or leased, brought onto the project premises. The Subcontractor shall waive all rights of subrogation against Contractor and Owner for losses covered by Insurance policy. The waiver shall also apply to any deductibles assumed by the subcontractor.



ADDITIONAL INSURANCE REQUIREMENTS

All insurance carriers shall maintain a minimum “Best Rating” of A-VII and otherwise be acceptable to CONTRACTOR.

Limit requirements can be met through a combination of “primary” and umbrella” or “excess” policies.

All deductibles or self-insured retentions (SIR) shall not be in excess of \$25,000. All deductibles or SIRs, regardless of size will remain the responsibility of SUBCONTRACTOR. Certificate shall include a 45 day notice of cancellation and delete the language “endeavor to” and “but failure to mail such notice shall impose no obligation or liability upon the company, it’s agents or representatives”. Notice of cancellation or reduction in coverage of insurance contracts shall be furnished by the insurance carrier to Attn: Accounting Department.

Liability policies furnished by SUBCONTRACTOR shall be primary to other liability policies which may be carried by CONTRACTOR and/or OWNER. Coverages maintained by CONTRACTOR and/or OWNER shall be excess and not contribute with policies of SUBCONTRACTOR.

SUBCONTRACTOR shall maintain all insurance required under this article for a period of twenty-four months following completion of Subcontractor’s work. Completed operations insurance (including CONTRACTOR AND OWNER as additional insured), Contractors Pollution Liability (if required) and Professional Liability (if required) must be maintained for not less than the time period defined in the statute of repose for the state where the project is located.

All of SUBCONTRACTOR’s insurance policies (with the exception of coverage provided by the state agencies that specifically do not allow it), regardless of whether they are required specifically hereunder or not, shall by appropriate language exclude any claim on the part of the insurer to be subrogated on payment of loss or otherwise to any claim against CONTRACTOR or OWNER. SUBCONTRACTOR hereby waives any right or claim to be subrogated on payment of loss or otherwise to any claim against CONTRACTOR or OWNER and further waives any right against CONTRACTOR or OWNER for damages caused by fire or other perils to the extent covered by property insurance maintained by CONTRACTOR or OWNER pursuant to the Contract documents, except such right as SUBCONTRACTOR may have to the proceeds of such insurance held by CONTRACTOR or OWNER as Trustee.