

5710 Ogeechee Road, Suite 200, Box 225 Savannaah GA 31405 www.southbridgehomeowners.org

CONTRACTOR QUALIFICATIONS STATEMENT

NAME			
PHONE	CELL		
ADDRESS	EMAIL		
LICENSE #			
TYPE OF ORGANIZATION CORPORATIONPARTNERSHIP_	INDIVIDUAL	_ LLC	
MEMBER OF HOME BUILDERS ASSOCIATION HEAD MEMBERSHIP #	_	YES NO	
FULL TIME BUILDER	YES, SINCE	NO	
(<u>Please Submit Photos</u>) NAME	ADDRESS		
	Date Finished		
NAME	ADDRESS		
Date Started	Date Finished		
NAME	ADDRESS		
Date Started	Date Finished		

2. TRADE REFERENCES (HVAC, Electrical, Plumbing) NAME OF COMPANY _____ CONTACT NAME _____ PHONE #_ ____ NAME OF COMPANY _____ CONTACT NAME _____ PHONE #_ ____ NAME OF COMPANY _____ CONTACT NAME _____ PHONE #_____ 3. BUSINESS ACCOUNT /SUPPLIERS REFERENCES NAME OF CREDITOR _____ ADDRESS _____ PHONE & FAX # _____ (BELOW TO BE FILLED OUT BY CREDITOR) DATE OPENED HIGH CREDIT TERMS BALANCE NAME OF CREDITOR _____ ADDRESS PHONE & FAX # (BELOW TO BE FILLED OUT BY CREDITOR) DATE OPENED _____ HIGH CREDIT ____ BALANCE ******************************** NAME OF CREDITOR _____ ADDRESS PHONE & FAX # _____ (BELOW TO BE FILLED OUT BY CREDITOR) DATE OPENED _____ HIGH CREDIT _____

TERMS _____

BALANCE _____

4. BANK REFERENCE

NAME OF BANK		CO NTACT	
PHONE & FAX #		ACCOUNT NUMBER	
(BEFOW TO BE FILLED OUT	BY BANK)		
DATE OPENED		NSF PAST 3 MONTHS	
BALANCE	CURRENT	Γ AVG	
authorized to check my credit	and employment e that, except as o	whether or not it is approved. You are history and to answer questions about your therwise prohibited by applicable law, you omeowners Association, Inc.	
SIGNATURE OF APPLICAN	T	SIGNATURE OF CO-APPLICANT	
PRINT NAME		DATE	