

Housing Rehab Program Contractor Prequalification Checklist

To prequalify as a contractor for the City's Housing Rehab Program, please complete and submit this form (please print), and attach all documents listed below.

Company Name: _____

Contractors Full Name: _____

Mailing Address: _____

Phone Number(s): _____

Federal Tax ID# or SS#: _____

- General & Automobile Liability Insurance naming City of Lakeland as additional insured
- Workers Compensation or certificate of exemption
- State Contractors license (copy)
- Hold Harmless & Indemnity form signed & notarized (*form provided by City of Lakeland*)
- List of Sub-contractors
- List of suppliers
- Completed project references



Community & Economic Development, Housing Division
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