

**BIRCH BAY WATER AND SEWER DISTRICT  
7096 POINT WHITEHORN ROAD  
BIRCH BAY, WA 98230-9675  
PHONE(360)371-7100 FAX(360)371-2806**

**SUBJECT: Small Works Roster**

**FROM:** \_\_\_\_\_ (Name) \_\_\_\_\_ (Phone)

\_\_\_\_\_  
\_\_\_\_\_  
(City, State, Zip)

The above named firm is hereby applying for acceptance to the Small Works Roster to perform such work in Birch Bay Water and Sewer District as per RCW 56.08.070.

The following is submitted:

Three (3) references where you have done similar work before:

	NAME (Contact Person)	ADDRESS	PHONE
(1)	_____	_____	_____
(2)	_____	_____	_____
(3)	_____	_____	_____

Proof of your license as a contractor in the State of Washington, pursuant to RCW 18.27, is hereto attached and must be submitted upon each renewal to BBW&S District.

A Certificate of Insurance, with minimum limits of \$1,000,000 COMBINED SINGLE LIMIT coverage, including vehicles; M & C, including collapse & underground; completed operations and contractual; is attached hereto and must be submitted upon each renewal to BBW&S District. The certificate includes a clause to the effect that the policy or certificate shall not be subject to cancellation or to a reduction in the required limits of liability or amount of insurance or any other material change until notice has been mailed via certified mail to the District stating when (no less than forty-five (45) days thereafter) such cancellation or reduction or change shall be effective.

Upon acceptance, you understand that you will be required to obtain all necessary permits and do hereby agree to comply with all District regulations and construction standards. The coverages as listed in the requirements above are included in the applicant's policy.

\_\_\_\_\_  
INSURANCE REPRESENTATIVE

\_\_\_\_\_  
DATE SIGNED

\_\_\_\_\_  
CONTRACTOR'S SIGNATURE

\_\_\_\_\_  
DATE SIGNED