

Exhibit B

CONTRACTOR INFORMATION FORM

Firm

Name of Firm _____

Address of Firm (No P.O. Boxes) _____

Type of Entity Nonprofit For-profit

Business Phone _____

Email Address _____

Are you currently registered to do business in the City of Pittsburgh?

Yes No If yes, provide City Tax ID number _____

Are you an MBE or WBE? MBE WBE

If an M or WBE, are you certified? Yes No

If certified, name of certification or certifying entity

Have any principals done, or are currently doing business using any other names? Yes No

If yes, provide ALL: _____

Have you done work with the City of Pittsburgh or the URA in the past 10 years? Yes No

Number of years your company has engaged in property maintenance work? _____

Provide 2 references (name, firm, phone number). Reference #1 _____

Reference #2 _____

What is your firm's current capacity? (# full time employees) _____ If awarded a contract, would you need to hire additional staff? Yes No

List tools and equipment currently available to you to complete this scope of work:

Insurance *Doing business with URA requires proof of insurance at time of contracting.*

Are you currently insured? Yes No

If yes, please provide the following:

Insurance Carrier _____

Insurance Policy No. _____

Owner(s) of Business or Officer(s) of Corporation

Name and Title (if Corporate Officer) _____

Address _____ Phone _____

City _____ State _____ Zip _____

SIGNATURE OF APPLICANT _____

DATE: _____