CONTRACTOR APPROVAL CHECKLIST (per contractor)

Borrower Name:		
Loan number:		
Contractor Name		
Address		
City	_State	Zip
Contact info (email/phone)		
License Number		
Verified contractor is not on Towne e	xclusionary	list
Verified contractor holds appropriate	license(s) (based on scope of project)
Verified contractor's license is curren	it: Exp Da	te
References:		
Reference #1: Name		
Date reference contacte	ed	
Notes from conversation:		
Reference #2: Name		_
Date reference conta	acted	
Notes from conversation:		

_____Verified W-9 fully completed and signed

____Verified contractor holds current insurance policy with minimum \$300,000 liability coverage

____Verified contractor holds current Workman's Compensation Insurance policy (if required)

____Verified contractor has minimum three years' experience

____Confirmed the absence of any negative reporting and/or complaints against contractor through:

____Better Business Bureau website: Date checked ______

____State licensing website: Date checked ______

____ Lexis/Nexis report pulled for projects exceeding \$30,000

Approved by: _____Date_____Date_____