



Builder and/or Sub-contractor Application Form

Name: _____

SSN: _____

Company: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

Tax ID: _____

Email: _____

Business Type _____
(LLC, Sole proprietorship, etc.)

Years of Experience _____
Specialty _____

Name(s) of Owners _____

Business License # _____ Residential Endorsement? YES NO

Do you have

Insurance? YES NO

Name of Insurance Carrier _____

Are you bonded? YES NO

Job History

Dates	Employer	Primary Responsibilities

Have you ever been involved in litigation as a result of work you have done? YES NO

If YES please explain:



References

Name or Company Name:
Address:
City/State/Zip:
Phone Number:
Type of Reference: (personal or business)

Name or Company Name:
Address:
City/State/Zip:
Phone Number:
Type of Reference: (personal or business)

Name or Company Name:
Address:
City/State/Zip:
Phone Number:
Type of Reference: (personal or business)

Signature

Date

Spirit of Alaska FCU-Name

Approval/Decline Date

Please provide copies of licenses and bonding

SPIRIT OF ALASKA

FEDERAL CREDIT UNION



Please fill out the attached application. We are working on an approved contractors list for Spirit of Alaska FCU. One of our owner builders has requested using your company and has supplied us with your bids. We would like to add you to our contractors list for our owner builders.

Please fax back to 907-459-5980 ATTN: Lacey

Thanks

Lacey Becker
Spirit of Alaska FCU
Ph.: (907) 328-7950
Fax: (907) 459-5980

1417 GILLAM WAY, FAIRBANKS AK 99701 | 907-459-5900 | 800-478-1949 | FAX: 907-459-5990

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