

In Association with the

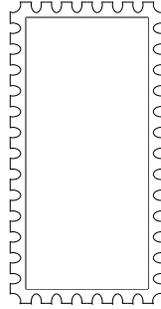
County of Suffolk's
Community Development
Office

**Town of East Hampton
Office of Housing and
Community Development**
267 Bluff Road
in Amagansett

Mailing Address:
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THE TOWN OF EAST HAMPTON
Office of Housing and Community Development
159 Pantigo Road,
East Hampton, New York 11937

**TOWN of
EAST HAMPTON**

**OFFICE OF HOUSING AND
COMMUNITY DEVELOPMENT**



**Home
Improvement
Program**

**Contractor
Application**

**TOWN OF EAST HAMPTON
HOME IMPROVEMENT PROGRAM
CONTRACTOR APPLICATION**

By submitting the application below, you must agree to the rules and regulations governing the East Hampton Town Home Improvement Program

Rules & Regulations

As each Home Improvement project becomes available, the next three eligible bidders, from our contractor list, will be given specifications to bid on the project. The project will be awarded to the person or persons submitting the lowest responsible bid for each particular job. At that point, notifications will be mailed to each bidder as to whether or not they have been selected for the job. All three contractor names will then go to the bottom of the contractor list.

Once the lowest responsible bidder for a project has been found, a contract will be drawn up between the contractor and the homeowner, and submitted to the Home Improvement Program. Work in progress will be inspected by the Home Improvement Program Field Inspector and no job is considered complete until the original bid specifications have been met and the project is signed off by the field inspector and the homeowner. **NOTE:** Payment for Home Improvement projects take three to four weeks and come from the County, not from the homeowner. If this time frame poses any problems, do not submit this application, as the policy cannot be changed.

NAME: _____ **DATE:** _____

ADDRESS: _____ **SOC. SEC.#:** _____

_____ **TELEPHONE #:** _____

BUSINESS NAME (if different from above): _____

BUSINESS ADDRESS: _____ **TELEPHONE :** _____

EMAIL: _____ **CELL PHONE:** _____

PRIMARY AREA OF BUSINESS (ie. Painting, roofing, G.C., electric, etc.): _____

**TOWN OF EAST HAMPTON HOME
IMPROVEMENT CONTRACTOR LIC#:** _____ **EXPIRES:** _____

SUFFOLK COUNTY LIC # _____ **EXPIRES:** _____
(plumbing & electric only)

LIABILITY INSURANCE COMPANY: _____

ACCOUNT #: _____ **EXPIRES:** _____

WORKER'S COMP INSURANCE COMPANY: _____

WORKER'S COMP POLICY #: _____ **EXPIRES:** _____

BANK REFERENCES

CHECKING ACCOUNT BANK NAME: _____ **ACCOUNT #:** _____

BUSINESS REFERENCES (please include phone number and contact person)

SUPPLIERS: _____

SIGNATURE: _____