

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

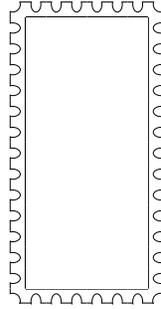
**Mailing Address:**

159 Pantigo Road,  
East Hampton, NY 11937  
631-267-7896

**Tom Ruhle**  
Director

**Francis J. Bock**  
Community Development  
Housing Technician  
FBock@town.east-hampton.ny.us

Revised May 1, 2009



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:** \_\_\_\_\_