

LAKE CHELAN/MANSON SCHOOL DISTRICTS  
SMALL WORKS ROSTER APPLICATION FORM

Date Application Form completed: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone: \_\_\_\_\_

Project type and size of interest: \_\_\_\_\_

\_\_\_\_\_

Please attach the following information:

- Copy of Washington State Contractor's License
- List of recent contracts completed
- List of references and contacts

Call 509 682-3515 for information.

Return to:

Lake Chelan School District

PO Box 369

Chelan, WA 98816-0369

(updated 1/6/11)