CONTRACTOR'S LICENSE CERTIFICATION FORM

RFx Title:	Elevator Maintenance and Repair Service - LUMCON	
Bidder:	Company Name:	
	Company Address:	

City, State, Zip Code: _____

Required License(s):

License Number(s)

Signature of Bidder or Authorized Representative:	
Typed or Printed Name:	
Title:	
Date:	

NOTE: THIS FORM SHOULD BE COMPLETED AND RETURNED WITH THE BID. FAILURE TO COMPLY WITH THIS REQUIREMENT MAY CAUSE YOUR BID TO BE REJECTED.