

**Attachment F – Contractor’s License Certification Form  
RFx 3000023355**

**CONTRACTOR’S LICENSE CERTIFICATION FORM**

**RFx Title:** Elevator Maintenance and Repair Service – SOS – State Archives

**Bidder:** Company Name: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

**Required License(s):**

Type of License	License Number(s)
Specialty: Elevators, Dumbwaiters	

**Signature of Bidder  
or Authorized Representative:** \_\_\_\_\_

**Typed or Printed Name:** \_\_\_\_\_

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

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

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