## PRIVATE LEAD SERVICE LINE REPLACEMENT PROGRAM Request for Qualifications (RFQ) Application

Licensed plumbers/utility contractors interested in performing private lead service line replacements in the City of Fond du Lac, as funded by the Fond du Lac Water Utility via Act 137, should submit a response to the RFQ by including (at minimum) the following information:

(This section to be filled out by applicant)

	(This section to be inical out by approant)			
Name of <b>Business</b> :				
Address:				
Email:				
City:	Phone:			
Direct any questions regarding information provided on this form to:				
Name:	Phone:			
Master Plumber Name:				
License Number(s):				
Expiration Date:				
Utility Pipe Layer Name, If Applicable:				
License Number(s):				
Expiration Date:				
Master Electrician Name:				
License Number(s):				
Expiration Date:				

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STATE OF)			
COUNTY OF)			
	being du	uly sworn, deposes and sa	ys that he/she
(Name of Officer/Owner)			
is the(Title)	of		
(Title)		(Name of Firm)	
and that the answers to the foregoing correct, and that any owner, bonding municipality, City of Fond du Lac, with	company, or other age	ncy herein named is herek	by authorized to supply the
			(Printed Name of Officer/Owner
			(Signature of Officer/Owner
Subscribed and sworn before me this	day of	2	_•
		Notary Public	
	My (	Commission Expires:	