



VENDOR APPLICATION

Owner Name: _____ Accepted By: _____

Company Name(s): _____ Application Date: _____

Mailing Address: _____ Work Start Date: _____

City/State/Zip: _____ Work End Date: _____

Phone (w/AreaCode): Cell: _____ Office: _____

Email Address: _____ EIN/SSN: _____

Vendor Type: Cleaning Electrical Plumbing GenRepairs Other _____

Years in Business: _____ Number of Employees: FullTime: _____ PartTime: _____

Skills & Certifications: _____

Licensed: City of Knoxville Other _____ Bonded? _____

Insurance: WorkComp Liability Auto _____ Proof Attached? Yes No

Days Available: Every Day Mon Tue Wed Thu Fri Sat Sun

Hours Available: Any Hour 9-1pm 1-5pm 5-9pm Other Hours _____

Hours by Day: Mon _____ Tue _____ Wed _____ Thu _____ Fri _____ Sat/Sun _____

Do you have work truck? Truck Van None Please attach copy of your Driver License w/Pic

Do you have own tools? Power Tools HVAC Electrical Plumbing Other _____

Do you have?: Computer Laptop Tablet Smart Phone Printer

Have you ever been convicted: Felony Misdemeanor (if yes, explain): _____

References: Work _____

Work _____

References: Personal _____

Personal _____

**I understand I am applying for work as an Independent Contractor (not as an employee).
I give Holmes Property Management LLC permission to contact my references, perform a back-ground check (including credit and criminal) and contact any other persons or companies.
I certify all answers are correct and true and agree work may end if misleading application.
I understand this application may be declined for any reason or for no reason.
I understand proof of insurance must be provided annually to start or continue work.
I will add HPM LLC to my insurance policy as an Additional Insured (at PO Box address below).**

Holmes Property Management LLC, PO Box 1335, Morristown TN 37816-1335 423-586-1770

APPLICATION MUST BE COMPLETE BEFORE WE CAN PROCESS YOUR REQUEST!

X _____
Vendor Signature Printed Name Date