

**ENCLOSURE DOCUMENT E**  
**VIRGIN ISLANDS HOUSING FINANCE AUTHORITY**  
***RESPONDENT'S QUALIFICATION STATEMENT***

Name of License Holder: \_\_\_\_\_  
Name of Company/DBA (if any): \_\_\_\_\_  
Legal Status: (check one) Corporation LLC Sole Proprietorship Partnership  
Business Location (office): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Website address (if any): \_\_\_\_\_

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Do you have a current USVI Business License? Yes No Number of Years licensed to conduct business in the USVI \_\_\_\_\_ Number of Home Construction completed in the last 5 Years \_\_\_\_\_, Average value of these contracts \$ \_\_\_\_\_ How many employees do the company have? \_\_\_\_\_ Do you have plan to use Subcontractors? Yes No If yes, company \_\_\_\_\_

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Have you ever failed to complete a project, been fired, sued by one of your clients and/or found in default of contract terms? Yes No If yes, explain on another sheet, what means were used to resolve the issue and the Circumstances and the outcome.

Are there or have there been any; Claims, Arbitration, Judgments or Liens against you? Yes No

If yes, explain on another sheet, the circumstances and outcome.

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List three non-VIHFA professional references that can be contacted for their input concerning your abilities:

- 1) Client Name \_\_\_\_\_ Contact Number \_\_\_\_\_
- 2) Client Name \_\_\_\_\_ Contact Number \_\_\_\_\_
- 3) Client Name \_\_\_\_\_ Contact Number \_\_\_\_\_

List your current projects under contract (Project Title or Clients Name), Value (Contract Value) and Percentage of Completion:

- |                      |             |                  |
|----------------------|-------------|------------------|
| 1) Client Name _____ | Value _____ | Percentage _____ |
| 2) Client Name _____ | Value _____ | Percentage _____ |
| 3) Client Name _____ | Value _____ | Percentage _____ |

*(If you have more contracts, please list on separate sheet)*

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*RESPONDENT 'S QUALIFICATION STATEMENT cont...*

List a minimum of five (5) homes completed in the last ten (10) years (provide the client name and address location of constructed home). Providing a photo of each home upon completion would also be helpful.

	<b>Client Name &amp; Contact Information:</b>	<b>Home Address:</b>	<b>Date of Final Completion (of Construction of the Home (Month / Year):</b>
<b>1.)</b>			
<b>2.)</b>			
<b>3.)</b>			
<b>4.)</b>			
<b>5.)</b>			

Proposer shall certify that the above information is true and shall grant permission to the VIHFA to contact the above-named person or otherwise verify the information provided.

Name and Title of Authorized Representative: \_\_\_\_\_

Signature: \_\_\_\_\_