



**Senior Access Program (SAP) &
Homeowner Assistance Fund (HAF)**

**CONTRACTOR LICENSING & INSURANCE
VERIFICATION FORM**

1. Contractor Information

Contractor Name:

Company Name:

Primary Contact:

Phone:

Email:

Business Address:

Alaska Contractor License #:

2. Licensing Verification

Active Alaska General Contractor License

Specialty Contractor License (specify):

License Verified via State of Alaska Database

License Expiration Date:

3. Insurance Requirements

General Liability Insurance (Required)

Carrier:

Policy Number:

Expiration Date:

Workers' Compensation Coverage Verified

Carrier:

Policy Number:

Expiration Date:

Additional Insured: JEDC / AHFC (if required)

4. SAP / HAF Compliance Checklist

- Meets SAP requirements for accessibility & safety-related work
- Meets HAF requirements for essential COVID-related hardship repairs
- No conflicts of interest with AHFC or JEDC
- Contractor eligible for federal/state-funded housing programs
- Insurance aligns with programming minimums

5. Required Documentation Attachments

- Copy of Contractor License
- Certificate of Liability Insurance (COI)
- Workers' Compensation Certificate
- W-9 Form
- Proof of Bond (if applicable)

6. Contractor Certification

I certify that all information provided above is true and accurate. I understand that false statements may result in disqualification from SAP/HAF projects.

Contractor Signature:

Date:

Printed Name:

Title: