

MAXWELL UNIFIED SCHOOL DISTRICT

2026 CUPCCAA BID LIST APPLICATION

APPLICATION

California Uniform Public Construction Cost Accounting Act

Please complete the following information

Legal Name of Contractor or Vendor: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Fax Number: _____

Contact Person: _____

E-mail Address: _____

Current Contractor's License: _____

Classification (e.g. C-2, C-7, etc.): _____

Current Contractor's License Number: _____

Contractor License Expiration Date: _____

Director of Industrial Relations (DIR): _____

Number: _____

Please list the type of work you are interested in and currently licensed to perform.

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

Submit form to Jeff Hoskins, MTO Supervisor at Maxwell USD, P.O. Box 788, Maxwell, CA 95955.

Completed forms may also be submitted via e-mail to Jhoskins@maxwell.k12.ca.us or via facsimile to: (530)438-2693. All submittals, via e-mail or facsimile, must be clearly labeled "**Maxwell Unified School District CUPCCAA Bid List Application**".