

DATE: _____

**ARKANSAS DEPARTMENT OF TRANSPORTATION
 BIDDER'S CERTIFICATION STATUS OF UNCOMPLETED CONTRACTS**

This Bidder's Certification shall be executed and filed before bidding documents will be released to prequalified contractors. **LIST ALL CONTRACTS AND SUBCONTRACTS IN FORCE OR PENDING**, not just those with the Arkansas Department of Transportation.

RETURN THIS FORM TO: Arkansas Department of Transportation
 Attention: Program Management Division
 Post Office Box 2261
 Little Rock, Arkansas 72203-2261
 Telefax Number (501) 569-2623
 Email: pmd@ardot.gov

DESCRIPTION OF CONTRACT	CONTRACT AMOUNT	UNCOMPLETED DOLLAR VALUE
1. _____	\$ _____	\$ _____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Add additional sheet(s) if needed

TOTAL UNCOMPLETED VALUE \$ _____

STATE OF ARKANSAS CONTRACTOR LICENSING BOARD NUMBER _____

EXPIRATION DATE _____

CERTIFICATION

I hereby certify that the above is a true and correct statement of the status of uncompleted contracts **currently awarded or pending award** to this company and of the licensing information presented.

<u>NOT TO BE FILLED IN BY CONTRACTOR</u>	
Financial Qualification	\$ _____
Less Uncompleted Value	\$ _____
Maximum Value Allowable	\$ _____
CLB # _____	

 (Company Name)

 (Address)

BY: _____
 (Signature)

TITLE: _____