



## CONTRACTOR APPLICATION FORM

I have enclosed the following materials for consideration as an MSCA STAR Qualified Contractor:

- 1. Company or company principals have a proven track record and have been involved in the HVACR or plumbing service business for a minimum of five years  
*INFORMATION REQUIRED FOR SUBMISSION: Resumes of company principals or company annual report*
- 2. Employ UA STAR certified technicians – a minimum of 25% of current employees in service division have attained UA STAR certification  
*INFORMATION REQUIRED FOR SUBMISSION: List of current employees with UA STAR certification*
- 3. Have an outstanding company safety record and maintain a documented service safety and health program which, at a minimum, includes the following components:
  - Written Corporate Safety Policy which includes compliance with all OSHA and EPA standards and regulations
  - Established Safe Work Practices
  - Worker Safety Training
  - Disciplinary Action for Non-compliance with Safe Work Practices
  - Established Substance Abuse Policy
  - Work Site Hazard Analyses
  - Procedures for Accident/Incident Investigations
  - Hazardous Materials Handling Program
  - Service Vehicle Safety Program
  - Recordkeeping Procedures*INFORMATION REQUIRED FOR SUBMISSION: Description of company's safety program plus completed OSHA 300A forms or MSCA STAR Safety Eligibility Form from last two years*
- 4. Provide on-going educational training to both field and in-house employees, including attendance at a minimum of one MSCA or MCAA-sponsored national or local program a year  
*INFORMATION REQUIRED FOR SUBMISSION: Listing of educational/training programs provided to employees at your company site and listing of local/national programs attended by your employees, including names of specific employees who attended*
- 5. Established Truck Inventory Control System and Major Tool Inventory Program  
*INFORMATION REQUIRED FOR SUBMISSION: Copy of your inventory program*
- 6. Provide and require photo ID cards to be worn which include company name (or other similar identification) for all field personnel  
*INFORMATION REQUIRED FOR SUBMISSION: Photocopy of your company photo ID*

7. Maintain highest levels of customer service standards.

*INFORMATION REQUIRED FOR SUBMISSION: Copy of your customer feedback survey or customer follow-up program or explanation of your customer service program PLUS three current letters of recommendation from customers attesting to your company's service, responsiveness, dependability and commitment to customer satisfaction*

Check the types of mechanical service business in which you are engaged:

- Air Conditioning
- Plumbing
- Heating
- Supermarket Refrigeration
- Ammonia Refrigeration
- Controls
- Building Operations
- Other \_\_\_\_\_

Number of field service employees: \_\_\_\_\_

**I hereby confirm that as a recognized MSCA STAR qualified contractor, I agree to follow the MSCA STAR standards of excellence as delineated above and maintain outstanding business practices, provide quality workmanship, offer exceptional customer service and support MSCA and the organized service industry.**

\_\_\_\_\_  
Name (signed) Date

\_\_\_\_\_  
Name (printed) Title

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone Fax

\_\_\_\_\_  
E-mail Website

Please return completed application form  
with all supporting information required for submission to:

**MSCA STAR Program**  
1385 Piccard Drive  
Rockville, MD 20850  
Phone: (301) 869-5800  
Fax: (301) 990-9690

