



Santa Fe **NEIGHBORS** *VECINOS* *de Santa Fe*
Neighbors helping neighbors age independently at home

SERVICE PROVIDER APPLICATION

Apply to Join the Santa Fe Neighbors Service Provider Network

Referred by: _____ (must be Santa Fe Neighbors member)

Organization or Company Name: _____

Address 1: _____

Address 2: _____

City: _____ Zip Code: _____

Contact person: _____

Title: _____

Phones: _____
Main *Mobile* *Other*

Email: _____

Web Address: _____

Description of Services: (list all you are able to provide)

Description of Rates:

Relevant Insurances with \$ amounts and carrier (including workers comp, liability and vehicle):

Relevant New Mexico licenses and certifications etc., in detail (e.g. contractors lic C-27 #555546)

Length of time in business and other information that might recommend your services to our members:

Are you able to offer members a discount? (please give details)

Please provide three references and their contact information:

REFERENCE NAME	PHONE NUMBER	REFERENCE EMAIL
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Is your Business bonded? _____ What is your Bond Number? _____

Do you have experience working with elder individuals? YES NO

Are you bilingual? YES NO

Santa Fe Neighbors' philosophy is that members always come first, and we strive to ensure prompt, excellent, courteous, and compassionate service. Additionally, we respect the confidentiality of our members' personal interactions, and ask our providers to pledge the same philosophy of respect, compassion, quality work, and reliability of service.

I understand there is no cost to being included in Santa Fe Neighbors' list of Recommended Service Providers.

I also understand that Santa Fe Neighbors will be receiving member evaluations upon the completion of work, and will update provider information annually. By submitting this application, I agree to provide services to the members of Santa Fe Neighbors sharing the same commitment to compassion, respect, quality work and reliability.

In addition, I understand that my contract for services is with the individual Santa Fe Neighbors' member, and not with Santa Fe Neighbors, Inc., a NM 501-(C)3 organization.

I Agree: YES NO Signature: _____ Date: _____