

JOB INFORMATION SHEET

Customer: _____ Phone: _____ Email: _____
 Street Address: _____
 City: _____ State: _____ ZIP: _____

Customer: Owner General Contractor Subcontractor Material Supplier Leasehold Interest
 Supplier to Supplier Public/Private Partnership (P3) Sub-subcontractor Commercial Useful Function Verified

PROJECT INFORMATION

NAME _____
 STREET ADDRESS _____
 CITY _____ STATE _____ ZIP _____

SCR Number _____ (UT PROJECTS ONLY) MNLR Number _____ (IA Residential)
 Registry Number _____ (PA and NC)

PROPERTY OWNER/AWARDING AUTHORITY

NAME _____
 STREET ADDRESS _____
 PHONE _____ EMAIL _____
 CITY _____ STATE _____ ZIP _____

PROPERTY LEASEHOLDER

NAME _____
 STREET ADDRESS _____
 PHONE _____ EMAIL _____
 CITY _____ STATE _____ ZIP _____

LENDER - (CA & AZ Projects Only)

NAME _____
 STREET ADDRESS _____
 PHONE _____ EMAIL _____
 CITY _____ STATE _____ ZIP _____

ARCHITECT

NAME _____
 STREET ADDRESS _____

ARCHITECT (continued)

PHONE _____ EMAIL _____
 CITY _____ STATE _____ ZIP _____

PRIME CONTRACTOR

NAME _____
 STREET ADDRESS _____
 PHONE _____ EMAIL _____
 CITY _____ STATE _____ ZIP _____

PRIME'S BONDING COMPANY Is this a private bonded job?

NAME _____
 STREET ADDRESS _____
 PHONE _____ EMAIL _____
 CITY _____ STATE _____ ZIP _____

SUBCONTRACTOR (if other than customer)

NAME _____
 STREET ADDRESS _____
 PHONE _____ EMAIL _____
 CITY _____ STATE _____ ZIP _____

SUB'S BONDING COMPANY

NAME _____
 STREET ADDRESS _____
 PHONE _____ EMAIL _____
 CITY _____ STATE _____ ZIP _____

Estimated Quantity: _____ Estimated Dollar Value: _____
 Rental: Estimated Monthly Fee: _____ Estimated Term of Rental: _____
 This job will have: One furnishing Several furnishings First furnishing date: _____ Last furnishing date: _____
 Tax Exempt – Send exemption certificate with job sheet.
 Signature: _____ Date: _____ Company: _____