



Project Information Sheet

This job sheet needs to be filled out completely and sent to the credit department for processing.

Date: _____ Branch: _____ TM: _____
Acct #: _____ Customer Name: _____
Job Amount: _____ Delivery Notification Email: _____
Lien Required? Yes ___ No ___

Project Location

Name: _____
Address: _____
City: _____ State: _____ Zip: _____ County: _____
Is this job taxable? Yes ___ No ___ (Please attached resale/exempt certificate)
Residential ___ Commercial ___ Private New Construction ___ Private Reroof ___ Federal/State ___

Property Owner

Name: _____ Phone #: _____
Address: _____
City: _____ State: _____ Zip: _____

General Contractor

Name: _____ Phone #: _____
Address: _____
City: _____ State: _____ Zip: _____
E-mail address: _____

Sub-Contractor

Name: _____ Phone #: _____
Address: _____
City: _____ State: _____ Zip: _____
E-mail address: _____

Surety

Surety Name (if applicable): _____ Bond #: _____
Address: _____ Phone #: _____
City: _____ State: _____ Zip: _____
E-mail address: _____