



## JOB INFORMATION SHEET

*PLEASE FAX TO 936-441-8468 PRIOR TO STARTING EACH NEW JOB*

<b>CUSTOMER</b>	CUST NUMBER		NAME	
	JOB NAME			JOB #
<b>JOB</b>	JOB ADDRESS			
	CITY, STATE ZIP			
<b>SUB- CONTRACTOR IF OTHER THAN CUSTOMER</b>	NAME		PHONE #	
	ADDRESS		FAX#	
	CITY, STATE ZIP		EMAIL	
<b>GENERAL CONTRACTOR</b>	NAME		PHONE #	
	ADDRESS		FAX#	
	CITY, STATE ZIP		EMAIL	
<b>PROPERTY LEASEHOLDER</b>	NAME		PHONE #	
	ADDRESS		FAX#	
	CITY, STATE ZIP		EMAIL	
<b>PROPERTY OWNER</b>	NAME		PHONE #	
	ADDRESS		FAX#	
	CITY, STATE ZIP		EMAIL	
<b>BOND COMPANY</b>	NAME		PHONE #	
	ADDRESS		FAX#	
	CITY, STATE ZIP		EMAIL	
	AGENT		BOND #	

<b>IS THIS A TAXABLE JOB?    YES _____    NO _____</b> <b><i>IF NO, PLEASE ATTACH THE APPROPRIATE TAX CERTIFICATE.</i></b>
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<b>FOR CREDIT DEPARTMENT USE ONLY</b>	FIRST SHIPMENT DATE		LAST SHIPMENT DATE	
	NOTICE OF COMPLETION		PRELIMINARY NOTICE MAILED	
	FINAL NOTICE MAILED		LIEN RECORDED	
	LIEN RELEASED		REMARKS	