

## License #979728 Subcontractor Information Sheet

Legal Company Name:		
Address:		
City/State/Zip:		
Office Phone:		
Trade:	Federal ID:	Contractor's License:
Estimator Contact:		Accounting Contact:
Estimator Email:		Accounting Email:
Direct # or Ext.:		Direct # or Ext.:
Closeout Contact:		
Closeout Email:		
	<u>Te</u>	rms & Requirements
Accounting		
	d upon date of re	eceipt prior to the 20th of each month. We DO NOT accept faxed
or emailed invoices.		
RELEASES: Upon receipt of final paym	ient a #4 Lien Rei	lease must be forwarded to us.
SUBCONTRACTOR QUALIFICATIONS:		
PRELIMS: Prelim requests should be	emailed to biddin	ng@lockrul.com
·		before a subcontractor can commence work on our jobsites.
CLOSEOUTS: Upon the completion of	any project that	requires a subcontract agreement, the subcontractor must forward t will be issued (ex: 1-year work guarantee letter, as-builts,
I have read and understand the above	terms and requi	rements from Lockrul Construction:
Signed:		Date:
For Office Use Only		
□ General Liability Insuran		□ Endorsed Sub Info Sheet
□ Workers Compensation		□ Auto Liability

□ Completed W-9 Form