

# PROJECT INFORMATION SHEET

Project Number: \_\_\_\_\_

Please complete this Project Information form and press Submit button or return to [credit@sbslp.com](mailto:credit@sbslp.com)

## Customer Information (SBS customer listed on the contract)

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \_\_\_\_\_  
Project Manager \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

**Relationship to Project**     Owner     General Contractor     Subcontractor     Other (Specify): \_\_\_\_\_  
Is the customer installing materials (if applicable)?     Yes     No

## Project Location (actual physical address of the project)

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ County \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \_\_\_\_\_

## Property Owner (the owner of the property where the material will be erected)

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \_\_\_\_\_  
Contact \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
 One Building     Multiple Buildings     New Construction     Improvement

### Material to be Furnished

Materials     Labor     Mat'ls & Labor     Spec Fab Mat'ls     Spec Fab Mat'ls & Labor

## Financial Information the lender or financial institution where funds are available for the project

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \_\_\_\_\_  
Contact \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

## General Contractor (If other than the Customer above)

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \_\_\_\_\_  
Project Manager \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

## Surety or Bonding Company (please provide a copy of the payment bond)

Surety \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \_\_\_\_\_  
Contact \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

## Architect

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \_\_\_\_\_

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_