

JOB INFORMATION SHEET



METAL SALES CUSTOMER

NAME	ACCOUNT #	BRANCH	SALESPERSON
ADDRESS	CITY	STATE	ZIP
CONTACT	PHONE	FAX	EMAIL
CUSTOMER IS: <input type="checkbox"/> Owner <input type="checkbox"/> General / Prime Contractor <input type="checkbox"/> 1 st Tier Subcontractor <input type="checkbox"/> 2 nd Tier Subcontractor <input type="checkbox"/> Material Supplier <input type="checkbox"/> Leasehold Interest			

PROJECT INFORMATION

\$	MSMC EST. AMOUNT (USD)	PURCHASE ORDER #	SALES ORDER #	EST. PRODUCTION DATE	EST. FIRST FURNISHING	EST. LAST FURNISHING
PROJECT NAME						
STREET ADDRESS						
CITY						
STATE						
ZIP						
CONTACT						
PHONE						
FAX						
EMAIL						
STRUCTURE: <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> IMPROVEMENT						
BUILDING: <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> AGRICULTURAL						
BUILDING DESCRIPTION						
PROJECT TYPE: <input type="checkbox"/> PRIVATE <input type="checkbox"/> PUBLIC – STATE <input type="checkbox"/> PUBLIC – FEDERAL						
Contract # (Federal) _____						
IF PUBLIC, PROVIDE THE FOLLOWING: 1) Copies of Payment and Performance Bond(s) 2) Federal Projects attach copy of Awards Letter						
TAX EXEMPT: <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, attach copy of exemption certificate						

OWNER – Jobsite/Project

NAME		
ADDRESS		
CITY	STATE	ZIP
CONTACT		
PHONE		
EMAIL		

OWNER – Land

NAME		
ADDRESS		
CITY	STATE	ZIP
CONTACT		
PHONE		
EMAIL		

LENDER

NAME		
ADDRESS		
CITY	STATE	ZIP
CONTACT		
PHONE		
EMAIL		

GENERAL / PRIME CONTRACTOR

NAME		
ADDRESS		
CITY	STATE	ZIP
CONTACT		
PHONE		
EMAIL		

1st TIER SUBCONTRACTOR

NAME		
ADDRESS		
CITY	STATE	ZIP
CONTACT		
PHONE		
EMAIL		

SURETY (GC / PRIME CONTRACTOR)

NAME		
BOND #		

SURETY (SUBCONTRACTOR)

NAME		
BOND #		

SUBMITTED BY: _____ NAME: _____ DATE: _____

MSMC APPROVED BY: _____