



**JOB INFORMATION SHEET**

- 1. This job information sheet needs to be filled out **completely**.
- 2. A signed purchase order identifying the project and stating the approximate material requirements.
- 3. If project is tax exempt, please provide **valid** exemption certificate.

**A. Project Type** check all that apply  Private  Public  Federal  Residential  Commercial  Rental  
 One Building  Multiple Building  New Construction  Improvement  Copy of Payment Bond (Req'd for Public work)

**B. Materials to be Furnished**  Materials  Labor  Mat'l's & Labor  Spec Fab Mat'l's  Spec Fab Mat'l's & Labor  
Amount \$ \_\_\_\_\_ Starting Date \_\_\_\_\_  
Description \_\_\_\_\_ PO \_\_\_\_\_

**C. Customer Information**  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**D. Customer's Relationship to Job**  
 Owner  General Contractor  Subcontractor  Other (specify): \_\_\_\_\_  
**Is the customer installing materials (if applicable?)**  Yes  No

**E. Job Location**  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_ Email \_\_\_\_\_

**F. Owner/Awarding Authority**  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**G. Lending Company**  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**H. General Contractor**  
1. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_  
2. Surety Name \_\_\_\_\_ Bond # \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**I. Contractor (if other than customer)**  
1. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_  
2. Surety Name \_\_\_\_\_ Bond # \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**J. Architect**  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**To be completed by customer if no separate purchase order exists.**  
Estimated Quantity \_\_\_\_\_ Estimated \$ Value \_\_\_\_\_ Materials \_\_\_\_\_  
Please forward completed form to: **Credit Department**  
Customer Signature \_\_\_\_\_

By checking this box, I agree that my electronic signature may substitute for my original signature and shall have the same legal effect as my original signature.

- Please select the email button above or return completed job information sheet to: [CreditDept@CarlisleCCM.Com](mailto:CreditDept@CarlisleCCM.Com).
- Questions? Please call Customer Financial Services, we are available to assist you at 1-800-260-3101