

Johnstone Construction Company

Subcontractor Information Sheet Company

Name: _____

Address: _____

City, State, Zip: _____

Office Phone: _____ Fax: _____

Names of Principals: _____

Contact Name: _____

Contact Phone: _____ Contact Email: _____

In Business Since (under this name) _____ Union: _____

Entity Type (corp., partnership, sole owner): _____

Federal Tax Id/ Social Security Number: _____

CA Contractors Number and Classification: _____

Please attach a copy of your contractor's license card with expiration date

Have you had any of the following?

OSHA Violation? _____ (If yes to any Please explain

Failed to complete a project? _____ on separate sheet)

Involved in company litigation? _____

Previous Projects: _____

Previous Project Reference

(Name/Phone#): _____