

Construction Specialties, Inc. P.O. Box 380 6696 Route 405 Hwy Muncy, PA 17756

PROJECT INFORMATION SHEET

Customer Name: Project Name:		Cu	Customer #: Date:	
		Da		
PO#:		Οι	ır Order #:	
Material:		Lo	cal Rep:	
Dear Customer,				
copy of the <u>Notice of</u> any delays with you	of Commencement. <u>P</u> r order.	lease complete and r	job, we require the project information or a eturn this form as soon as possible, to avoid	
Project Manager: _	Name	Phone	Email	
Project Address:				
Owner: _	Name			
-	Address			
General	City, State and Zip			
Contractor:	Name			
-	Address			
-	City, State and Zip			
Bonding Company: _				
	Name		Phone	

Bond # (If project is bonded, please provide a copy of the bond)