***Please use the “Tab” key to complete this form***

**Contractor Name:** **Request Date:**

**Bid Date:** **Bid Time:**

**Job Name:** **Address:**

 **City, State, Zip:**

**General Contractor Name:**

**Construction Manager:**

**Project Manager:**

**Other General Contractors bidding:**

**Estimated Bricklayer and Allied Craftworker hours on project:**

**Does this project require Prevailing Wage?**

**Known Non-Union Contractors bidding project:**

**Address if available:**