

## SUBMITTAL GENERAL INFORMATION SHEET

From: (applic	ant to be party placed u	inder con	tract)		
Name:					
Address:					
City-State-Zip	o				
Phone:	Emergency P	hone:			
Cell:	Email:				
TAX ID:					
EXISTING R	FTA CONTRACT?	YES □	NO □	CONTRACT NO	<b>)</b> .
□ Pl	JBLIC AGENCY				
□ Pf	RIVATE PARTY				
	☐ COMMERCIAL				
	☐ INDUSTRIAL				
	☐ RESIDENTIAL				
US/UCC STATUS	□ UTILITY				
	□ OTHER				
			<u>STATE</u>		<u>ID NUMBER</u>
	☐ INDIVIDUAL				
	□ LLC				
	□ PC				
	□ LLLP				
	□ LLP				
	□ LPA				
	□ LP				
	□ PC				
	☐ SOLE PROPRIET	ORSHIP			





Applicant's Agent: (Point of Contact) Name: Firm: Address: City: State: Zip: Phone: Cell phone: Email: Comment: Consultant(s): (Point of Contact) Name: Firm: Address: City: State: Zip: Cell phone: Phone: Email: Comment: