**PROJECT INFORMATION**

Provide as much information as available at the current time.

swilkinson@atas.com | P: 484.221.6353 | F: 610.395.9342

PROJECT INFORMATION

Project Name:

Address: City: State: Zip:

Project Category: \_\_\_\_Public \_\_\_\_Private

DISTRIBUTOR

Distributor Name:

Contact Name:

Email Address: Phone Number:

Address: City: State: Zip:

SUBCONTRACTOR

Subcontractor Name:

Contact Name:

Email Address: Phone Number:

Address: City: State: Zip:

GENERAL CONTRACTOR

Project GC Name:

Contact Name:

Email Address: Phone Number:

Address: City: State: Zip:

PROJECT OWNER

Project Owner Name:

Contact Name:

Email Address: Phone Number:

Address: City: State: Zip:

LENDER

Lender or Payment Bonding Company Name:

Contact Name:

Email Address: Phone Number:

Address: City: State: Zip:

Loan or Bond Number:

*Providing the requested information does not guarantee credit.*

*Credit worthiness of a particular customer, individual or project will be at the sole discretion of ATAS International, Inc.*

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