



Prelim Information Request Form

Your Company Information

Name: _____
 Address: _____
 Phone: _____ Email: _____
 Job Name: _____ Job Number: _____
 Job Address: _____
 Total \$ amount: _____ Start Date: _____
 Description of work being performed: _____
 Contract with: _____

Subcontractor (If applicable):

 Address: _____
 Phone: _____ Fax: _____

General Contractor: _____
 Address: _____
 Phone: _____ Fax: _____

Lender and/or Bonding Company: _____
 Address: _____
 Phone: _____ Fax: _____
 Bond Number: _____ Phone: _____

****Total Amount for the above job**** _____

SMARDAN Official Use Only

APN: _____ Date: _____

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810 E. Mason Street Santa Barbara, CA 93103 PH: 805-963-8991 Fax: 805-966-3586	14009 Halldale Avenue Gardena, CA 90249 PH: 310-532-5260 Fax 310-532-2567	17273 Mt. Hermann St Fountain Valley, CA 92708 PH: 714-545-6912 Fax: 714-545-3496	257 Tank Farm Road San Luis Obispo, CA 93405 PH: 805-543-0664 Fax: 805-543-0810	262 W Alameda Avenue Burbank, CA 91502 PH: 818-845-2477 Fax: 818-955-8248
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