



Subcontractor/Supplier/Vendor Profile

If you would like to be considered for future J. F. Schultze Construction projects, please complete this form in it's entirety and fax to (704) 295-0943 - no cover sheet required.

Company: _____

Address: _____

City, State, Zip: _____

Phone: _____

Mobile: _____

Fax: _____

Primary Contact: _____

Title: _____

Contact Email: _____

Please indicate the geographic areas where you are licensed and interested in working, please add a second sheet if necessary:

<u>City</u>	<u>State</u>	<u>City</u>	<u>State</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please indicate the type of work you are licensed to perform:

<u>CSI DIV.</u>	<u>CATEGORY</u>	<u>CSI DIV.</u>	<u>CATEGORY</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

We prefer to receive Bid Invitations via ___Email ___ Fax

J. F. Schultze Construction, LLC minimum Insurance requirements for Subcontractors is \$2 million aggregate and \$1 million each occurrence.

Can you meet the minimum Insurance requirement? ___Yes ___No

Thank you for your interest in J. F. Schultze Construction, LLC. We look forward to a successful future.