

EZSWEED OLICTE DECLIEST INFORMATION SHEET

		CONTACT	
PHONE:	EXT:	EMAIL:	•
FAX:	MOBILE:	NE	Γ: XTEL #:
BID DATE:	DATE:PROJ OWNER: DJ NUMBER:CONTRACTORS PROJ #:		
PROJ NUMBER: _	NUMBER:CONTRACTORS PROJ #:		
CITY:COUNTY:			
LOCATION:			
CONTRACTO JOB IS BEIN SERVICES REQUIMilling CleanuMilling CleanuSweeping only	OR HAS THE JO G BID I RED Ip & Sweeping Ip only	OB	S OR INTERSECTIONS) ether full width or wedge milling
CUTBACKS)	S, PAVEBACK F	REQUIREMENTS, ⁻	E LOW TURN LANES, CROSSOVERS,
NUMBER OF MOV	/E-INS:	TENT. START	DATE:

IN ORDER TO EXPEDITE YOUR QUOTE, PLEASE FILL OUT ALL PERTINENT INFORMATION ABOVE AND ATTACH ANY PLANS OR DIAGRAMS OF THE PROJECT, IF NECSSSARY.

PLEASE FAX INFORMATION TO 727-939-1343

THIS FORM IS AVAILABLE ONLINE

AThttp://www.ezsweep.net/FormsInformation.htm