

Skyline Roofing & Sheet Metal Company, Inc.

Your Name: _____

Business Name: _____

Address: _____

Business Phone: _____

Cell Phone: _____

Fax: _____

Email: _____

Sole Proprietor Partnership S Corporation Corporation

Union Non-Union Both

Commercial Residential Both

Description of services you provide (type of work you are looking for):

What is the price range of your contracts: \$ _____ to \$ _____

Number of Employees: _____ Number of years in business: _____ Current liability insurance coverage: _____
(Please attach a copy of your insurance)

Type of equipment owned: _____

Have you ever provided payment and/or performance bonds? Yes _____ No _____

If yes, what is your bonding capacity? \$ _____

Are you familiar with AIA (American Institute of Architects) Contract and requisition forms? Yes _____ No _____

Please provide 3 References:

I certify that my answers are true and correct to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature _____ Date _____

3060 W. Minnesota Street ~ Indianapolis, IN 46241
(317) 243-7663 * (317) 243-7781 (fax)