PINNACLE QUICK CONTRACT APPLICATION

General Information:

Contractor:				
Phone:	Fax:	Email:		
Type of construction	work specialized in:			
Type of Business:	□Proprietorship □Partnershi	p □Corporation	Date business started:	
Federal Tax ID No.		Contractors License	e #:	
Owners/Indemnitors: (Provide information on all owners over 10% and their spouses; use additional sheets if necessary)				
1) Legal Name:		SS#:	DOB:	
Spouse's Name: _		SS#:	DOB:	
Home Address: _				
% of Business Ow	vnership:	Do you own real es	tate? □Yes □No	
Are any of your a	ssets in trust? \Box Yes \Box No	If so, what %?		
2) Legal Name:		SS#:	DOB:	
Spouse's Name: _		SS#:	DOB:	
Home Address: _				
% of Business Ov	vnership:	Do you own real es	tate? □Yes □No	
Are any of your a	ssets in trust? □Yes □No	If so, what %?		
Pinnacle Surety & In with any information meeting obligations. authorization to rem	nsurance Services herein after concerning or pertaining to the A copy of this agreement shall ain in force until rescinded by the	alled Agency, or its see undersigned's finared be considered the see applicant in writing	ng.	
Executed this	day of	- :	, 20	
Ву:	By: Print Name:			

Note: This form is for prequalification. If there is a bid or payment/performance bond pending then complete the bond request form and return with the required information listed on the bond request form.

PINNACLE SURETY & INSURANCE SERVICES