

CONTRACTOR INFORMATION SHEET

CONTRACTOR NAME _____

MAILING ADDRESS _____

FEDERAL ID # _____

PHONE NUMBER _____

FAX NUMBER _____

PAYROLL/BENEFIT CONTACT PERSON _____

PHONE NUMBER _____

FAX NUMBER _____

EMAIL ADDRESS _____

WAGE/FRINGE BENEFIT INCREASE CONTACT PERSON

PHONE NUMBER _____

FAX NUMBER _____

EMAIL ADDRESS _____

PLEASE FAX TO:
PLUMBERS & STEAMFITTERS LOCAL UNION 52
334.271-1647
or EMAIL TO kay@ualocal52.org