

TURTLE SOUTHEAST QUOTE REQUEST INFORMATION SHEET

COMPANY NAME: _____ CONTACT: _____
PHONE: _____ EXT: _____ FAX: _____
EMAIL: _____ MOBILE: _____

BID DATE: _____ PROJ OWNER: _____

PROJ NUMBER: _____ YOUR JOB# _____

CITY: _____ COUNTY: _____

LOCATION: _____

(INCLUDE ANY MAJOR CROSS STREETS OR INTERSECTIONS)

____ JOB HAS BEEN AWARDED

____ THE JOB HAS MILLING ITEMS

____ JOB IS BEING BID

____ THE JOB HAS ASPHALT REMOVAL

LIST MILLING QUANTITIES BELOW (INCLUDE ITEM #, DEPTH, ROADWAY DIMENSIONS)

PLEASE INCLUDE ADDITIONAL INFORMATION BELOW

(IE: WORK HOURS, PAVEBACK REQUIREMENTS, TURN LANES, Crossovers, CUTBACKS)

TENT. START DATE: _____ NUMBER OF MOVE-INS: _____

JOB SITE SUPT: _____ SUPT MOBILE #: _____

SUPT EMAIL: _____

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

PLEASE FAX INFORMATION TO 727-518-9621

THIS FORM IS AVAILABLE ONLINE AT

<http://www.turtlese.com/FormsInformation.htm>