



825 Steneri Way, Sparks NV 89431

JOB INFORMATION REQUESTED

CUSTOMER NAME: _____

To: _____ **Date:** _____

PLEASE COMPLETE THE FOLLOWING PRELIMINARY LIEN INFORMATION

JOB INFORMATION:

Job Name: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____ Job #: _____

PO #: _____ Public Job: _____ Private Job: _____

Parcel #: _____

Estimated total purchase from Jensen Precast on this job: \$ _____

Scheduled Completion Date: _____

OWNER INFORMATION:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: () _____

GENERAL CONTRACTOR INFORMATION:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: () _____

LENDER OR BONDING COMPANY INFORMATION (Bonding information required for public jobs)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: () _____ Loan or Bond #: _____

Thank you for providing this critical information. We appreciate your business.