

IBEW 292 Target Request Form

Contractor: _____

Name: _____

Address: _____

City: _____

Phone: _____

E-mail: _____

Fax: _____

Project

Name : _____

Address: _____

City: _____

County: _____

Prevailing Wage?

State

Federal

Scope of Work: _____

Project Architect: _____

Contact: _____ **Phone:** _____

Project Owner: _____

Contact: _____ **Phone:** _____

Construction Manager: _____

Contact: _____ **Phone:** _____

General Contractor(s): _____

Contact: _____ **Phone:** _____

Bid

Bid Date: _____

Bid Time: _____

Bid To: _____

Start Date: _____

Completion Date: _____

Electrical Bid: _____

Material Cost: _____

Labor Cost: _____

Approximate Number of Hours: _____ **Hourly Rate used for Labor:** _____ **How many Apprentices will you use:** _____

Other Contractors Bidding: _____

Notes:

