

TURTLE SOUTHEAST QUOTE REQUEST INFORMATION SHEET

CONTRACTOR: _____ CONTACT: _____

PHONE: _____ EXT: _____ EMAIL: _____

FAX: _____ MOBILE: _____ NEXTEL #: _____

BID DATE: _____ PROJ OWNER: _____

PROJ NUMBER: _____ CONTRACTORS PROJ #: _____

CITY: _____ COUNTY: _____

LOCATION: _____

(INCLUDE ANY MAJOR CROSS STREETS OR INTERSECTIONS)

_____ CONTRACTOR HAS THE JOB

_____ 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, CROSSEOVERS, CUTBACKS)

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

JOB SITE SUPT: _____ JOB SITE PHONE #: _____

SUPT MOBILE #: _____ SUPT NEXTEL #: _____

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>*