

CITY OF CERES WELL NO. 22 TREATMENT SYSTEM UPGRADE PROJECT

REQUEST FOR INFORMATION		
To: City of Ceres, Public Works Administration		RFI No
Attn:		
From:		Date Submitted:
Subcontractor: N/A		Date Needed By:
Regarding	Drawing(s): N/A	Specification Section(s):
0.1:		
Subject (plan set, facility, utility, etc.):		
Request for Information:		
Signature:		Date:
Response:		
Treopenies.		
City Signature:		Date:

Note: