

retropole

The future of area lighting

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New Job Start Form

For Previously Opened Accounts Starting a New Job, or as Supplemental Information for a New Construction Account

Customer Name _____

Billing Address _____

Address _____

City, State, Zip + 4, County _____

Above Customer Is: Owner Sub-Contractor General Contractor

OWNER OF LAND/BUILDING

Customer Name _____

Address _____

City _____

State _____ Zip Code _____

Phone _____

GENERAL CONTRACTOR

Customer Name _____

Address _____

City _____

State _____ Zip Code _____

Phone _____

SUB-CONTRACTOR

Customer Name _____

Address _____

City _____

State _____ Zip Code _____

Phone _____

SUB SUB-CONTRACTOR

Customer Name _____

Address _____

City _____

State _____ Zip Code _____

Phone _____

Attach a Copy of the Legal Description *if available* Photocopy and fax to (972) 987-1659

Is Job Bonded? No Yes If Yes: Payment

Performance? Bond Issued To: _____

Surety Name _____

Physical Location of Job _____

Street _____

City, County, State, Zip _____

Contact Name and Phone Number _____

Sub-Division Name _____

Lot Number _____ Block Number _____

Signature _____ **Date** _____