

Village of Wilmette Project Contractor Update Form

Property Address: _____ Date: _____

Project Number: _____ Role: _____

Name and Signature: _____

NAME	ADDRESS, CITY, ZIP	DAY PHONE
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GENERAL CONTRACTOR: _____

PAID _____ CUST. NO. _____

ARCHITECT: _____

CARPENTER: _____

PAID _____ CUST. NO. _____

EXCAVATOR: _____

PAID _____ CUST. NO. _____ CERTIFICATE OF INSURANCE _____

CONCRETE: _____

PAID _____ CUST. NO. _____ CERTIFICATE OF INSURANCE _____

MASONRY: _____

PAID _____ CUST. NO. _____

ELECTRICIAN: _____

PAID _____ CUST. NO. _____

CITY OR VILLAGE REG. NO. _____

PLUMBER: _____

PAID _____ CUST. NO. _____

BOND WITH EXP. DATE/055 _____ LICENSE/058 _____

MECHANICAL: _____

PAID _____ CUST. NO. _____

ROOFER: _____

PAID _____ CUST. LIC. NO. _____ STATE OF IL LIC. NO. _____

DUMPSTER: _____

PAID _____ CUST. NO. _____ CERTIFICATE OF INSURANCE _____

DEMOLITION: _____

PAID _____ CUST. NO. _____

OTHER: _____

PAID _____ CUST. NO. _____

UPDATED IN MUNIS PROJECT RECORD: _____ DATE: _____ INITIALS: _____