

## G. GREENE CONSTRUCTION COMPANY, INC.

Company Name:		Date:	
Address:			
Telephone Number	Fax Number:		
Contact Persons:	Title:	E-mail:	
	Title:	E-mail	
Type of Work :	Union or C	Union or Open	
Number of Years in Business:			
Number of Employees: Field:	0:	ffice:	
Geographical area:			
Bank Officer:			
	mber:		
Contact Name @ Bonding Agen	t:		
Bonding Capacity: Single	Aggro	egate:	
Volume of work (last year):			
Total worth of Work in Progress	rogress:Total Backlog of Work		
Worker's Compensation Experie	ence Modification Rating:		
	h any litigation or arbitration with own		
Please submit a sample copy of	f your current insurance certificate		
Please submit latest audited fin	nancial statements with footnotes		
Please provide three client refo numbers on your company let	erences and three current vendor re terhead	ferences with names and phone	
Submitted By:	(sign)_	(print)	
Title:			