

PRELIMINARY NOTICE REQUEST FORM

TO: CONSTRUCTION PRELIENS & PAPERWORK

FAX: (530) 662-2865
PHONE: (530) 662-2863
jordigrant@aol.com

FROM: _____ / _____
YOUR COMPANY YOUR NAME

PHONE: _____ FAX: _____ DATE: _____

1. Allow 7 days after date of receipt for Preliminary Notice Preparation.

2. Services Desired (please check):

Preliminary Notice _____ Same Day Service if Possible _____ (\$15.00 Additional Charge) Cover Letter _____

3. Provide all of the following information you have available, including phone numbers.

Your Contract is With: _____ Job Name: _____

Address: _____ Address: _____

Phone: _____ County: _____

Relationship to Parties: Direct Contractor _____ Subcontractor _____ Material Supply _____ Equipment Rental _____

Material furnished: _____ Estimated job cost: \$ _____

Job start date: _____ Estimated completion date: _____

Private Works _____ or Public Works _____ Parcel #: _____

Property Owner: _____ Phone: _____

Address: _____

Prime / Original Contractor: _____ Phone: _____

Address: _____

Lender: _____ Phone: _____

Address: _____

☐ **CLCA Member**

Current CLCA Password: _____

CLCA Members Receive 5% Discount!