

# PERFORMANCE

SWING STAGE, INC.

## PRE-NOTIFICATION WORKSHEET

DATE \_\_\_\_\_

### JOB INFORMATION

CUSTOMER NAME (YOUR NAME)		PHONE
ADDRESS		FAX
CITY	STATE	ZIP
NAME OF JOB		
JOB ADDRESS		
CONTRACT OR P.O. NUMBER		

### OWNER

OWNER OF PROPERTY/PROJECT		
ADDRESS		
CITY	STATE	ZIP

### GENERAL CONTRACTOR

GENERAL CONTRACTOR NAME		
ADDRESS		PHONE
CITY	STATE	ZIP

### LENDER

BANK/LENDER NAME		
ADDRESS		PHONE
CITY	STATE	ZIP

**PLEASE FAX COMPLETED FORM TO 916.489.9196**

ADMINISTRATIVE OFFICE • 3101 ADAMS ROAD • SACRAMENTO, CA 95864 • 916.489.9194 PHONE • 916.489.9196 FAX

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