

Plans and Specs Order Form

Project Name:			
GMC Project No.:			
Requestor Information	(check one):		
Contractor S	ub-Contractor	Supplier/Mfr. Plan	Room
Contact Name:			-
Company:			-
Address (No PO Box): _			-
City, State Zip:			-
Phone:			-
Email:			-
License # (if applicable)	:		_
Choose one or more of	the following:		
Printed set mailed (via U	PS)	Digital set (via skysite.com)	
Make check payable to: GMC 1906 East Three Notch S Andalusia, AL 36421		If sub-contractors will be utilized, the prim to DBE sub-contractors and show proof of	
Additional comments o	r requests:		_
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