



Plans and Specs Order Form

Project Name: Water Treatment Facility Rehabilitation

Plan Deposit: \$20.00 digital / \$100 printed (non-refundable)

Pre-Bid Conference: Friday, October 23, 2026 @ 10:00 a.m.

Bid Opening: Friday, October 30, 2026 @ 10:00 a.m.

GMC Project No: CMGM260067 - Town of Fulton

Requestor Information (check one):

Contractor ☐

Sub-Contractor ☐

Supplier/Mfr. ☐

Contact Name: _____

Company: _____

Physical Address (No PO Box): _____

City, State Zip: _____

Phone: _____

Email: _____

License # (if applicable): _____

Choose one or more of the following:

Printed set mailed (via UPS) ☐

Digital set (via skysite.com) ☐

Make the check payable to:

GMC

Attn: Renee Fowler

2660 EastChase Lane

Suite 200

Montgomery, AL 36117

Reference Project No: _____ on the check.

Additional comments or requests: _____

***Return completed form with a scanned copy of plan deposit check to**

patsy.stinson@gmcnetwork.com

If you do not receive a reply within 24 hours, please call me at 334-222-2699