



PROJECT SUBMITTAL FORM

This form was created by Shasta Builders' Exchange and is for SBE use only

SBE Project Submittal Policy Questionnaire

1. I have received a Building Permit for this Project. Yes No City _____ County _____
2. If no, is the Project in Plan Check? Yes No What is the current status? _____
3. Is there a Bank or Lendor established for this project? Yes No Explain _____
4. If yes, have they approved the Engineer's Estimate? Yes No Explain _____
5. Have the Title 24 Calcs been completed for this project? Yes No Explain _____

Project Information

Project Name _____

Project Location _____ **Bid Date** _____ **Bid Time** _____

Project Description _____

- | | | | | | |
|--|--|---------------------------------------|---------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Appliances | <input type="checkbox"/> Foundation | <input type="checkbox"/> Propane Tank | <input type="checkbox"/> Cabinets | <input type="checkbox"/> Windows | <input type="checkbox"/> Concrete |
| <input type="checkbox"/> Framing | <input type="checkbox"/> Countertops | <input type="checkbox"/> Garage Doors | <input type="checkbox"/> Roofing | <input type="checkbox"/> HVAC | <input type="checkbox"/> Insulation |
| <input type="checkbox"/> Security System | <input type="checkbox"/> Doors | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Sheet Metal | <input type="checkbox"/> Drywall | <input type="checkbox"/> Earthwork |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Masonry | <input type="checkbox"/> Tile | <input type="checkbox"/> Electric Gates | <input type="checkbox"/> Fencing |
| <input type="checkbox"/> Stucco | <input type="checkbox"/> Fireplace/Stove | <input type="checkbox"/> Painting | <input type="checkbox"/> Tile/Granite | <input type="checkbox"/> Flooring | <input type="checkbox"/> Paving |
| <input type="checkbox"/> Vacuum System | <input type="checkbox"/> Well Construction | <input type="checkbox"/> Plaster | <input type="checkbox"/> Other _____ | | |

Contact Information

Are you the Owner General Contractor Architect/Engineer

Company _____ **Contact** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Phone _____ **Cell** _____ **Fax** _____

Email _____ **Alternative Email** _____

1. Are you seeking a General Contractor to build the entire project? Yes No Explain _____
2. Who should bidders call if they have questions? Owner General Contractor Architect/Engineer
3. Are bids accepted by fax or email? Yes No Explain _____

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