

## **Customer Information Sheet**

Property Name					
Address		City	St	Zip	
Manager			Phone		
Fax	<u> </u>	Email			
Maint. Mgr.			Phone		
Fax		Email			_
PMC					
Address		City	St	Zip	
Phone			Fax		
Contact 1			Positio	on	
Contact 2			Positio	on	
Phone		Email			
Bill TO:	PMC	Manager		Both	
Send via:	Email	USPS		Fax	
Payment Terms	On Re	ceipt	Net 15	Net 30	
Price per Leak					
Roof Type	Age o	of Property	Numb	Number of Bldgs	
Roof Pitch	Age c	of Roof # o	f Stories	Siding Type	
Shingle Color		Roof System <sub>.</sub>			
Notes					