



Island Condo Management Corp.

57 Beach Street

Staten Island, New York 10304

718-981-2500

- Consulting
- Staffing
- Accounting Services
- Budgets

CONTRACTOR INFORMATION SHEET

DATE: _____

General Contractor: _____

Project Manager / Contact: _____

Contractor's License Number: _____

Address: _____

City: _____ State: _____ Zip: _____ - _____

Phone: () _____ - _____ Extension: _____ Fax: () _____ - _____

Email address: _____ Website: _____

Please specify the contracting services that you provide:

Do you use Subcontractors? YES NO

If YES, please specify: _____

Upon receipt of this form, you will be added to a prospective bids list.

You will be required to submit a copy of your insurance along with any bids that you submit.

Thank you for your interest in working with Island Condo Management Corp!