



### Construction Job Profile

#### JOB NAME & LOCATION:

Job Name:		
Street Address:		Suite:
City:	State:	Zip:
Job Start date:	Scheduled Completion Date:	

#### GENERAL CONTRACTOR INFORMATION:

General Contractor Name:		AP Contact:	
Street Address:			Suite:
City:	State:	Zip:	
Email:	Phone#:		

#### PROJECT MANAGER:

Project Manager Name:		
Office Phone#:	Cell Phone#:	Email:

#### OWNER INFORMATION:

Owner Name:	
Phone#:	Email:

#### JOB DESCRIPTION:

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218 S US Highway 1 | Suite 101 | Tequesta, FL 33469

email: construction@FKConstructionFunding.com  
web: FKConstructionFunding.com

V10 / 20-5

Toll Free: 800 913 8090  
Fax: 800 918 7830



### Construction Job Profile

## PAYROLL AND BONDING INFORMATION:

Is Project Public or Private  Public  Private  
 (If) Public Please Select:  Federal  State  
 Is Certified Payroll Required on this job  Yes  No  
 Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Is Project Bonded?  Yes  No  
 Are you Required to be Bonded?  Yes  No  
 Bonding Company: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Phone#: \_\_\_\_\_

Name of Insurance Agency: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Is this a Union Job?  Yes  No  
 Union Name: \_\_\_\_\_ Union Rep: \_\_\_\_\_ Phone#: \_\_\_\_\_

Has a Preliminary Notice been filed?  Yes  No  
 By Whom? \_\_\_\_\_

Is there Retainage on this Job?  Yes  No  
 If Yes, Retainage Amount? \_\_\_\_\_ %

## ADDITIONAL INFORMATION REQUIRED:

Please furnish the below listed information together with the completed application form.

- 1 Please complete and sign this application. You may fax or email it.
- 2 Fully Executed Construction Agreement with all attachments and exhibits.
- 3 Copy of insurance Certificate.
- 4 Copy of Certified Payroll
- 5 Copy of Preliminary Notice
- 6 Copy of Bond

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## Construction Job Profile

**LIST ALL SUPPLIERS AND SUBS (use additional pages if necessary):**

Company:		Contact:
Street Address:		Phone:
City:	State:	Zip:
Total Contract/ Estimate: \$	Email:	Account #:

Company:		Contact:
Street Address:		Phone:
City:	State:	Zip:
Total Contract/ Estimate: \$	Email:	Account #:

Company:		Contact:
Street Address:		Phone:
City:	State:	Zip:
Total Contract/ Estimate: \$	Email:	Account #:

Company:		Contact:
Street Address:		Phone:
City:	State:	Zip:
Total Contract/ Estimate: \$	Email:	Account #:

Company:		Contact:
Street Address:		Phone:
City:	State:	Zip:
Total Contract/ Estimate: \$	Email:	Account #:



### Construction Job Profile

**BILLING REQUIREMENTS:**

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**CONTRACT INFORMATION:**

<b>TOTAL CONTRACT AMOUNT:</b>	\$
Supplier/Sub/Vendor #1-	\$
Supplier/Sub/Vendor #2-	\$
Supplier/Sub/Vendor #3-	\$
Supplier/Sub/Vendor #4-	\$
Supplier/Sub/Vendor #5-	\$
Supplier/Sub/Vendor #6-	\$
<b>TOTAL DUE SUPPLIER/SUBS/VENDORS:</b>	\$
<b>ESTIMATED PAYROLL EXPENSE:</b>	\$
<b>TOTAL ESTIMATED JOB COST:</b>	\$
<b>ESTIMATED GROSS PROFIT:</b>	\$

**SIGNATURE:**

*The undersigned agrees that the information provided in this Construction Job Profile is deemed complete, accurate and truthful.*

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_