**Department of Land Use – Engineering Section**

**Construction Information Sheet**

**Project Name:**

**SLD Application #:**

**ENG Project Phase #:**

**MF/Instrument #:**

**Owner/Developer:**

Contact Person:

Address:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Phone Number: | | |  | | | | | | |  | | Fax Number: | | |  | | |  |
|  | E-Mail Address: | | | | |  | | | | | | |  |  |  |  |  |  |  |
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|  | **General Contractor:** | | | | | | | |  | | | |  |  |  |  |  |  |  |
|  | Contact Person: | | | |  | | | | | | | |  | Contractor ID: | | |  | |  |
|  | Address: |  | | | | | | | | | | |  |  |  |  |  |  |  |
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|  | Phone Number: | | | |  | | | | | |  | | Fax Number: | |  | | | |  |
|  | E-Mail Address: | | | | | |  | | | | | |  |  |  |  |  |  |  |
|  | Contact on Site: | | | | | |  | | | | | |  |  |  |  |  |  |  |
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|  | **Site Contractor (SWM/E&S, Sanitary Sewer):** | | | | | | | | | | |  |  |  |  |  |  |  |  |
|  | **Blue Card Holder:** | | | | | | |  | | | | |  |  |  | **Blue Card#:** | |  |  |
|  | Contractor ID: | |  | | | | | | |  | | |  |  |  |  |  |  |  |

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address:

Contact on Site:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Certified Construction Reviewer (CCR):** | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |
|  | CCR Card Holder: | | | | | | | | |  | | |  |  |  |  | CCR #: | | |  | |  |
|  | Address: | | |  | | | | | | | | |  |  |  |  |  |  |  |  |  |  |
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|  | Phone Number: | | | | | |  | | | | | |  |  | Fax Number: | |  | | | | |  |
|  | E-Mail Address: | | | | | | | |  | | | |  |  |  |  |  |  |  |  |  |  |
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|  | **Supervising Professional Engineer:** | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |
|  | Name: | |  | | | | | | | | | |  |  |  |  | PE#: | |  | | |  |
|  | Company: | | | | |  | | | | | | |  |  |  |  |  |  |  |  |  |  |
|  | Address: | | |  | | | | | | | | |  |  |  |  |  |  |  |  |  |  |
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|  | Phone Number: | | | | | |  | | | | | |  |  | Fax Number: | |  | | | | |  |
|  | E-Mail Address: | | | | | | |  | | | | |  |  |  |  |  |  |  |  |  |  |
|  |  |  | | |  | | | | | |  | |  |  |  |  |  |  |  |  |  |  |
|  | **Landscape Architect:** | | | | | | | | | |  | |  |  |  |  |  |  |  |  |  |  |
|  | Name: | |  | | | | | | | | | |  |  |  |  | Register#: | | | |  |  |
|  | Company: | | | | |  | | | | | | |  |  |  |  |  |  |  |  |  |  |
|  | Address: | | |  | | | | | | | | |  |  |  |  |  |  |  |  |  |  |
|  |  |  | | |  | | | | | | | |  |  |  | | |  | | | |  |
|  | Phone Number: | | | | | |  | | | | | |  |  | Fax Number: | |  | | | | |  |
|  | E-Mail Address: | | | | | | | |  | | | |  |  |  |  |  |  |  |  |  |  |
|  |  |  | | |  | | | | | | | |  |  |  |  |  |  |  |  |  |  |
|  | **Architect:** | | | |  | | | | | | | |  |  |  |  |  |  |  |  |  |  |
|  | Name: |  | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |
|  | Company: | | | | |  | | | | | | |  |  |  | Register #: | |  | | | |  |
|  | Address: | | |  | | | | | | | | |  |  |  |  |  |  |  |  |  |  |

Phone Number: Fax Number:

E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Builder** :

Contact Person:

Contractor ID:

Address:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Phone Number: |  |  | Fax Number: | |
| E-Mail Address: |  |  |  |  |

Contact on Site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Third Party Inspection Agency:**

Name:

Company:

Address:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Phone Number: |  |  | Fax Number: | |  |
| E-Mail Address: |  |  |  |  |  |
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Revised February 3, 2011