

REQUEST TO SUBLET WORK

- SUBCONTRACTOR
 LOWER TIER SUBCONTRACTOR

PRIME CONTRACTOR	FEDERAL EMPLOYER I.D. NO.*	CITY CONTRACT NO.
PROJECT NUMBER AND NAME		REQUEST NUMBER

APPROVAL IS REQUESTED TO SUBLET THE FOLLOWING DESCRIBED WORK TO:

SUBCONTRACTOR OR LOWER TIER SUBCONTRACTOR		UBI #	EMPLOYMENT SECURITY I.D. NO.*
L & I LICENSE #	EXPIRATION DATE	FEDERAL EMPLOYER I.D. No. *	EXPIRATION DATE
CITY BUSINESS LICENSE #	EXPIRATION DATE	EMAIL ADDRESS	
ADDRESS		TELEPHONE NO	
CITY	STATE	ZIP	ESTIMATED STARTING DATE
IF LOWER TIER SUBCONTRACTOR, ID OF CORRESPONDING SUBCONTRACTOR			

* If no Federal Employer ID No., use owner's Social Security No.

WORK TO BE SUBLET

ITEM NO.	PARTIAL	ITEM DESCRIPTION	AMOUNT

I understand and will ensure that the Subcontractor will comply fully with the plans and specifications under which this work is being performed.	PRIME CONTRACTOR SIGNATURE	DATE
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THIS AREA FOR CITY OF AUBURN USE ONLY

PERCENT OF TOTAL CONTRACT THIS REQUEST _____ PREVIOUS REQUESTS _____ % SUBLET TO DATE _____ %	REMARKS: <input type="checkbox"/> DBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE
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CONTRACT ADMINISTRATION SPECIALIST	DATE	
<input type="checkbox"/> APPROVED		