Click to Clear All Except Contract Info.

Click to Clear All



MARYLAND STATE HIGHWAY ADMINSTRATION OFFICE OF CONSTRUCTION CONTRACTOR - SUBCONTRACTORS AGREEMENT FORM

REQUEST NUMBER:	CONTRACT AMOUNT: \$		
CONTRACT NO:	FAP NO:	STATE	
ROJECT DESCRIPTION FOR EACH SUBCON	TRACTOR:		
1. PRIME CONTRACTOR:			
FEDERAL I.D. NO.			
2 PROPOSED MBE SUBCONTRACTORS —			
) 		-	
ATTACHMENTS			
Written Subcontract Agreements A	ttached &		
Place an "check mark" in the boxes below if d	lescribed condition is true,		
Place an "check mark" in the boxes below if D/MBE Non-D/MBE		ntractor Firm:	
D/MBE Non-D/MBE		years	
3. IS SUBCONTRACTOR AN MBE LISTED	ON SCHEDULE OF PARTIC	CIPATION?	Yes No
4. TOTAL OF THE SUBCONTRACTORS:	\$	&	%
Prime Contractor Signatur	ρ	Date:	