## Project Registration Form

## Please take a moment to fill out our project registration form and <u>e-mail to project@valcom.com</u>. Date

Company Registering the Project	Estimated Award Date	
Company	- Start Date	End Date
Address	Estimated ES Solutions E	auipment Cost
City State Zip Code		
Phone Fax	Type of Funds	Public O Private
Website	Please describe the	
	scope of work.	
Person Registering the Project		
Name		
E-mail	Estimated Order Date	2
Cell Fax		
Facility Owner/End User	Additional Details	
Name		
E-mail	Initial Meeting Date	
Cell Fax	Please list attendees and site	
Tenant (if other than owner)	of initial meeting	
	L	Initial Estimates
Name	Part #	Quantity
Project Description:		
Project Name		
Facility Name		
Address		
City State Zip Code		
I certify that the information contained in this application is correct to the best of my knowledge, and that I have read and agreed to the Terms and Conditions.		
<ol> <li>To submit form:</li> <li>If using Adobe Acrobat Reader or Internet Explorer click the submit be</li> <li>If using Chrome, Edge, Foxfire, etc. you will need to complete form ar save to your computer and e-mail form to project@valcom.com</li> </ol>		

Is this a bid or design build?