OneSource
A Sonepar Company

JOB INFORMATION SHEET

Fields marked with an asterisk (*) are required.

ONESOURCE'S CUSTOMER INFORMATION		
OneSource Salesperson Name:		Date:
*Customer Name:		Customer Account #:
*Customer Address:		Purchase Order Issued: Yes ☐ No ☐
Customer Contact Name:	Contact Phone:	Contact Email:
JOB INFORMATION		
Project Start Date:	Est. Completion Date:	PLS Job?: Yes ☐ No ☐
General Description of Materials/Services:		*Est. Job Value:
*Job Tax Exempt? Yes ☐ No ☐ Resale #: _____		**Resale/Partial Exemption Certificate must be submitted with Job Information Sheet. If provided at a later date, retroactive sales tax credits may not apply.
*Job Type: Private ☐ Residential ☐ Commercial ☐ Public ☐ Federal ☐ Tribal ☐		
*Job Name:		*Job No.:
*Job Address:		
Customer's Jobsite Contact Name:		
Jobsite Contact Phone:		Jobsite Contact Email:
SOLAR JOBS *(Construction Loan Lender Information Below is Required for Solar Jobs)*		
Finance Type: Cash ☐ Financed ☐ Lease ☐ Power Purchase Agreement ☐		
CONSTRUCTION LOAN LENDER		
Lender Name:		Lender Phone:
Lender Address:		
PAYMENT/PERFORMANCE BOND *(Required: Public, Federal and Tribal Jobs (Private if applicable))*		
General/Prime/Direct Contractor's Surety		Bond No.:
Surety Name:		
Surety Address:		
Customer or Subcontractor's Surety		Bond No.:
Surety Name:		
Surety Address:		
PROPERTY OWNER or LANDLORD		
*Name:		Phone:
*Address:		
Contact:	Phone:	Email:
PROJECT OWNER *(i.e. End User/Tenant/Solar System Owner)*		
*Name:		Phone:
*Address:		
Contact:	Phone:	Email:
GENERAL/PRIME/DIRECT CONTRACTOR		
*Name:		Phone:
*Address:		
Project Manager:	Phone:	Email:
SUBCONTRACTOR *(If Not Customer)*		
Name:		Phone:
Address:		
Project Manager:	Phone:	Email:

Incomplete job information may result in delays in timely job setup. Please ensure all details are provided accurately.

I understand that OneSource is relying on the truthfulness and accuracy of the above information in providing the materials and services for this project and declare that the foregoing is true and correct.

Completed By: _____

Signature Date Print Name Title