



B.J. Armstrong Custom Homes

TRADE CONTRACTOR AGREEMENT

In order to be considered for future projects, please supply the following information:

Name: _____

Address: _____

Phone (day): _____ (evening): _____

Fax: _____ Website: _____

E-mail: _____ License No.: _____

Employer ID: _____

Do you have Workers' Compensation Insurance? Yes No \$_____ (limit)

Do you have liability insurance? Yes No \$_____ (limit)

Do you have the required licenses to work in the areas described? Yes No

Subcontractor must be incorporated. A current business license, occupational license (where required) and Certificates of Insurance showing proof of Workers' Compensation and Liability Insurance are **required prior to start of the job**. A current W-9 must be on file with the Builder. Payment for services rendered will not be made until proof of the above is furnished to the builder.

Payment terms: All invoices paid 30 days from date of invoice

By signing this agreement, you state that you have read and understand the terms and conditions stated in the Statement of Conditions. This is not a contract unless signed below by an authorized representative of the General Contractor:

Subcontractor: _____

General Contractor: _____

Date: _____

PLEASE MAIL COMPLETED FORM TO:

B.J. Armstrong Custom Homes
7 Brookline Ct.
Bloomington, IL 61704

Or fax to 866-458-6817 (toll free)