



Previous Job Reference

Owner Contact Information

(____)

Contractor Information

Project performed by contractor (name and type of project): _____

Amount of contract: \$ _____

Did the contractor provide adequate equipment, labor, and supervision for this job or others?

Was the job completed on time? Yes No _____

Was the work completed to satisfaction? Yes No _____

Do you feel this contractor is suited to perform this type of work? _____

Were there any penalties? No Yes _____

Were there any bills paid late? No Yes _____

Were there any bills left unpaid? No Yes _____

How would you rate the contractor's work? Excellent Satisfactory Fair Poor/Unsatisfactory

Would you work with this contractor again? Yes No

Additional remarks: _____

Owner: _____

Signed: _____

Date: _____

**** Please return by fax to (217) 391-8742 Attn: Tyler ****