

EMAIL FORM



UA Local 527 SOUTHWESTERN STABILIZATION FUND - CONTRACTOR REQUEST FORM 225 Frobisher Drive Waterloo On N2V 2G4

Phone 519-746-3300 **Email: stab@ua527.com**

	Date:	
Company Name		
	Phone: _	
Company Representative	Fax:	
Title	Signatu	re
Please accept this as a request for funding uncherein:	der the Stabilization l	Fund Program for the project outlined
PROJECT NAME:		
ADDRESS:		
DESCRIPION OF PROJECT: RESIDENTI	AL □ INDUSTRIAI	L COMMERICAL ['INSTITUTIONAL
STABILIZATION HOURS REQUESTED		
Closing to General Contractors		Non — Union Contractors Bidding
		(Minimum of 2 required)
TENDERS CLOSING — DATE & TIME		
TENDERS CLOSING—DATE & TIVIE		
Date:	Time:	a.m. $_{\square}$ p.m.
DURATION OF PROJECT		
Start Date	Completion Date	

All Stabilization requests must be submitted a minimum of $\underline{48 \text{ hours}}$ prior to closing for consideration of funding.