

**Department of Transportation and Public Works
Architecture, Engineering & Environmental Services Division
Milwaukee County City Campus
2711 W. Wells Street, Room 201
Milwaukee, Wisconsin 53208
(414) 278-4861 Fax: (414) 223-1366**

Please fax this completed form ONLY between the hours of 7:00am and 11:00am

Please complete the following:

Contact Name: _____

Company Name: _____

Address: _____

Telephone No.: _____ Fax No.: _____

Credit Card No.: _____ Exp. Date: _____
(MC/VISA ONLY)

Credit Card Billing Address (If different from above):

**General Contractor Subcontractor

****All General contractors must be qualified by the Milwaukee County Clerks Office, this qualification lasts for 3 years and must be date stamped by the County Clerks Office five days prior to the bid due date.**

Project Number: _____

Project Name: _____

Cost:(Include handling fee) \$_____

Effective 11/30/09 ALL plans are non-refundable. Please read official advertisement located at www.county.milwaukee.gov/bop