

TO:

Project Title: Location: Contractor: Address:

PLANNING, DESIGN & CONSTRUCTION

Sixth Avenue and Grant Street • PO Box 172760 • Bozeman, Montana 59717-2760 Phone: (406) 994-5413 • Fax: (406) 994-5665

ACKNOWLEDGEMENT OF SUBCONTRACTORS		
MONTANA STATE UNIVERSITY PLANNING, DESIGN & CONSTRUCTION	PPA NO Date:	

Listed below are the principal subcontractors proposed on this project. All subcontracts exceeding \$5,000 are to be listed.

The Contractor certifies that these subcontractors:

1. Have been advised of the labor standards and provisions applicable to this project.

6TH AND GRANT STREET, PO BOX 172760

BOZEMAN, MONTANA 59717-2760

- 2. That all provisions incorporated in the Contract between the Owner and the undersigned contractor will be incorporated in the contracts between the Contractor and any Subcontractors.
- 3. Are competent to accomplish the work subcontracted to them.

NAME AND ADDRESS OF SUBCONTRACTORS	REGISTRATION NO.	TYPE OF WORK	
bmitted by:			
(Company/Contractor)	(Nan	ne)	(Date)
eviewed by:(Architect/Engineer)			<u> </u>
(Architect/Engineer)	(Nan	ne)	(Date)
cknowledged by: Montana State University	ersity		
Planning, Design & Construction (Nam		ne)	(Date)