



Job-Flex™ EZ Form

Products. Service. Knowledge.

Your Company's Name:
Address:
City/Zip:
Telephone:
Fax:

Today's Date: Job Name:
Job Address:
City: State: Zip: County:
Date of first delivery of material or beginning of service and/or labor furnished:
Quote amount: \$
Payment Terms with Customer Billing Cycle Net 30 Other
Estimated Job Start Date: Estimated Job Completion:
Type of Work Being Done: Pavement Maintenance Pavement Marking Signage
Other (describe):

I am the: Owner General Contractor Sub Contractor 2nd Tier Sub Contractor 3rd Tier Sub Contractor
Please provide the Name, Address and Phone Number for the following:
\*Your Customer:
General /Prime Contractor Name:
Owner / Agency Name:
\*Bonding Agency:
(\*If public property bonding information is required, including the bond number)

It takes 48-72 hours to process completed Job-Flex™ EZ Form. Incomplete Job Flex™ EZ Form will delay approval process. Unless otherwise notified JobFlex account will be closed to purchases 15 days after estimated completion date or 60 days after jobflex is approved if no purchases have been made.

JobFlex account terms are net 45 If this account goes past these terms a 1.5% monthly finance charge will be added and could suspensd purchase ability on all open accounts

If a lien is placed on this property due to non-payment on this account a \$150 adminstrative fee will be added along with any costs associated with filing the lien

Bonded jobs not paid within terms will incur any costs associated with sending a notice of non payment and submitting a claim against the bond

I have read and understand the terms and requirements of this document and our credit application Initials

Preferred Method of Contact: Phone: Email: Fax:
Authorized Signature:
Printed Name:
Title:
Date:
Contact Telephone #: Fax #:
Email:

Any questions, please contact our Credit Specialist at (904) 448-4074 x 27
Email to us at: pppaccounting@pppcatalog.com
or fax to us at: (904) 448-4076