

City Of Bridgeport
515 West Main St • P.O.
Phone 304-842-8200



Bridgeport, WV 26330
Fax 304-842-8213

GENERAL CONTRACTOR AND SUB-CONTRACTOR REPORT FORMS

PROJECT LOCATION/DESCRIPTION:

GENERAL CONTRACTOR:

(Name)

(Address)

CONTACT PERSON:

PHONE: () -

AMOUNT OF CONTRACT \$ 0.00

CHANGE ORDERS \$0.00

REVISED CONTRACT AMOUNT \$0.00

DOLLAR AMOUNT RECEIVED TO DATE: \$0.00

PERSON PROVIDING INFORMATION:

Date / / (mm/dd/yy)

Phone () -

Fax () -

Signature _____

- UPDATE INFORMATION
- FINAL INSPECTION