

Milwaukee Water Works

Safe, Abundant Drinking Water.

R-163
Attachment "A"

FORM A

CONTRACT FIRM REGISTRATION FORM

CONTRACTOR: _____

PLANT/SITE: _____

CONTRACT/SERVICE ORDER No. _____

WATER ENGINEERING PROJECT No. _____

PRIMARY CONTACT PERSON: _____

OFFICE PHONE NUMBER: _____

CELL PHONE NUMBER: _____

REQUESTED WORK HOURS (00am – 00pm): _____

NUMBER OF EMPLOYEES TO BE WORKING ON-SITE: _____

**Signature certifies receipt of the materials outlined in
Contract Section 01500, Part 2 – Security and Safety, Section C, Policies.**

SIGNATURE: _____

PRIMARY CONTACT PERSON

DATE: _____

***Accompanying this form should be a complete listing of all
equipment to be stored on site for the duration of the project.***