

CAMPANELLI ASSOCIATES CONSTRUCTION CORP.

Lower Tier Subcontractor/Supplier Notification Form

Subcontractor is required to sign the appropriate section of this form and include when returning the signed contract document package.

- **If Section A. is signed, please return a copy for each lower tier subcontractor and supplier to be involved. (You may enter "to be determined", but please provide an LTS Notification Form and their Certificate of Insurance as soon as your LTS has been hired.)**
- **If Section B. is signed, please return one copy.**

A. I, the undersigned, an authorized signatory for my company, do hereby notify Campanelli Associates Construction Company, per Article XII of our Subcontract, of our intent to sublet a portion of this contracted work, as outlined in the following scope, to a lower tier subcontractor/supplier.

Lower Tier Subcontractor/Supplier:

Name: _____

Address: _____

Contact Name: _____

Telephone Number: _____ **Fax Number:** _____

Scope of Work to be Sublet: _____

Does scope include on-site labor? _____

Estimated Value of Work to be Sublet: _____

Signed: _____

Name & Title: _____

Company Name: _____

Date: _____

Project Name & Location: _____

Subcontract Date: _____

Please copy and submit an individual notice for each lower tier subcontractor to be employed by this subcontractor.

This subcontractor must instruct their on-site lower tier subcontractors to submit a certificate of insurance to CACC prior to commencement of sublet work, in accordance with limits shown in Article VII of this subcontract. (An outline of the insurance parameters for this project is attached for your convenience.)

PLEASE BE ADVISED: LOWER TIER SUBCONTRACTORS WILL NOT BE ALLOWED TO PERFORM WORK ON SITE UNLESS VALID INSURANCE DOCUMENTATION HAS BEEN PROVIDED.

B. I, the undersigned, an authorized signatory for my company, do hereby declare that no portion of the work identified in our subcontract with Campanelli Associates Construction Company will be sublet to a lower tier subcontractor.

Signed: _____

Name & Title: _____

Company Name: _____

Date: _____

Project Name & Location: _____

Subcontract Date: _____