

CPXXXX REQUEST TO SUBLET WORK

- SUBCONTRACTOR
 LOWER TIER SUBCONTRACTOR

PRIME CONTRACTOR		FEDERAL EMPLOYEE I.D. NO. *		CITY CONTRACT NO.	
JOB DESCRIPTION (Title)				REQUEST NUMBER	
APPROVAL IS REQUESTED TO SUBLET THE FOLLOWING DESCRIBED WORK TO:					
SUBCONTRACTOR OR LOWER TIER SUBCONTRACTOR			UBI #		EMPLOYMENT SECURITY I.D. NO.*
L & I LICENSE #		EXPIRATION DATE	FEDERAL EMPLOYEE I.D. No. *		EXPIRATION DATE
CITY BUSINESS LICENSE #		EXPIRATION DATE	EMAIL ADDRESS		
ADDRESS				TELEPHONE NO	
CITY		STATE	ZIP	ESTIMATED STARTING DATE	
IF LOWER TIER SUBCONTRACTOR, ID OF CORRESPONDING SUBCONTRACTOR				. :	
* If no Federal Employer ID No., use owner's Social Security No.					
WORK TO BE SUBLET					
ITEM NO.	PARTIAL	ITEM DESCRIPTION			AMOUNT
I understand and will ensure that the Subcontractor will comply fully with the plans and specifications under which this work is being performed.				PRIME CONTRACTOR SIGNATURE	
				DATE	
THIS AREA FOR CITY OF AUBURN USE ONLY					
PERCENT OF TOTAL CONTRACT THIS REQUEST _____			REMARKS: <input type="checkbox"/> DBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE		
PREVIOUS REQUESTS _____ %					
SUBLET TO DATE _____ %					
PROJECT INSPECTOR DATE			<input type="checkbox"/> APPROVED		



CITY OF AUBURN PUBLIC WORKS
 ENGINEERING DIVISION
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