Sheet Metal 10 Report DATE **AGENT CNTY** ASSISTANCE prevailingwages@smw10.org **FEDERAL ITEMS** PROJECT NAME # STORIES FUNDING: Federal State Neither Apartment Building* (Bldg) Residential* PROJECT New Maint. Remodel Addition EA. UNIT DESCRIPTION Dormitory (Bldg) School (Bldg) () Kitchen Treatment Plant (Heavy) Hospital (Bldg) O Bath Motel/Hotel (Bldg) Water/Sewer (Heavy) ADDRESS or LOCATION Nursing/Assist. Living Facil.* (Bldg) Other: Office/Commercial Building (Bldg) CITY STATE EST. START DATE EST. END DATE TOTAL PROJECT VALUE COMMERCIAL SHEET METAL ☐ Union ☐ Non-Union CONTRACTORS C10 Resid. Building Highway Heavy ARCHITECTURAL SHEET METAL ☐ Union ☐ Non-Union Don't Report to FED ■ Don't Report to State **A10** INDUSTRIAL SHEET METAL GC or CM NAME U Non-U ☐ Union ☐ Non-Union □ GC □ CM 110 SUPERINTENDENT SUPT. PHONE RESIDENTIAL SHEET METAL ☐ Union ☐ Non-Union **R10** P.M. PHONE PROJECT MANAGER OTHER SHEET METAL Union Non-Union **OTH** CONTRACTOR CODE CONTRACT AREA ABBR. **WORKER FULL NAME** (dn arw = repeat) e.g. C10, A10, ... e.g. C10, A10, ..