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Télééc. : 514 852-4560
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REQUEST INFORMATIONS FOR DECLARATION OF CONTRACT

Company name (client): _____

Address: _____

City: _____ Prov.: _____ Postal code: _____

Phone: _____ Fax: _____

Contact name: _____ Email: _____

Project name: _____

Project #: _____

Address of shipping: _____

City: _____ Prov.: _____ Postal code: _____

Owner of the building: _____ Phone: _____

Address: _____

City: _____ Prov.: _____ Postal code: _____

Company name (contractor): _____ Phone: _____

Address: _____

City: _____ Prov.: _____ Postal code: _____

SURETY

Surety #: _____

Value of the contract: _____

Surety company name: _____

Address: _____

Phone: _____ Fax: _____

Please, send back by Fax: (514) 852-4560 or Email: comptabilite@valtec.ca