



GMX PROCUREMENT/CONTRACT NO.: _____
 GMX WORK PROGRAM NO.: _____
 GMX PROJECT/SERVICE TITLE: _____

PRIME & SUBCONTRACTOR/SUBCONSULTANT INFORMATION STATEMENT

	PRIME	PRIME	PRIME
Legal Name of Firm*			
EIN/FEI Number			
Firm Contact Name			
Title			
Address			
City, State, Zip Code			
Telephone Number			
E-mail address			
Principal Address of the Firm			
City, State, Zip Code			
Telephone Number			
E-mail address			
Work to be Performed			
Type of License required for the Work to be Performed (if applicable)			
License Number (if applicable)			
SB Certification			
LB Certification Number & Exp. Date			
Minority Certification & Exp. Date			



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PRIME & SUBCONTRACTOR/SUBCONSULTANT INFORMATION STATEMENT

	SUB	SUB	SUB
Legal Name of Firm*			
EIN/FEI Number			
Firm Contact Name			
Title			
Address			
City, State, Zip Code			
Telephone Number			
E-mail address			
Principal Address of the Firm			
City, State, Zip Code			
Telephone Number			
E-mail address			
Work to be Performed			
Type of License required for the Work to be Performed (if applicable)			
License Number (if applicable)			
SB Certification			
LB Certification Number & Exp. Date			
Minority Certification & Exp. Date			



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PRIME & SUBCONTRACTOR/SUBCONSULTANT INFORMATION STATEMENT

*Exactly as Registered with the State of Florida (i.e. Corp., LLC, Inc., P.A., etc.)

Please duplicate these pages as necessary to provide the requested information.

The Prime & Subcontractor/Subconsultant Information Statement shall be completed by the Bidder/Proposer to include information on proposed Subcontractor/Subconsultant and will become a part of the Contract Documents. Except as allowed by the Solicitation Documents, any changes made to this Prime & Subcontractor/ Subconsultant Information Statement after Bid/Proposal submission must be submitted in writing to GMX for approval prior to that Subcontractor/Subconsultant performing the Work.

BIDDERS/PROPOSERS SHALL COMPLETE THIS FORM LEGIBLY AND IN ITS ENTIRETY.

ALL INFORMATION PROVIDED HEREIN MAY BE VERIFIED BY GMX.