



*Character, Customer Service, Employee Owned*

**Southwest's Most Progressive Distributor of Plumbing, Electrical, & HVAC Supplies  
Over 160 Branches Serving a 5 State Area**

**PROJECT INFORMATION SHEET**

Date \_\_\_\_\_

Branch \_\_\_\_\_

**OWNER OF PROJECT**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_

**PRIME CONTRACTOR**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_

**PROJECT INFORMATION**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Project # \_\_\_\_\_

**BONDING COMPANY**

Name \_\_\_\_\_ Bond # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Est Date of Completion \_\_\_\_\_ Est Project Cost \$ \_\_\_\_\_ (Attach Copy of Bond)

**LOCKE CUSTOMER INFORMATION**

Name \_\_\_\_\_ Customer Account # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Please email credit@lockesupply.com.**

**MAILING ADDRESS**  
P.O. Box 26128  
Oklahoma City, Oklahoma 73126

**SHIPPING ADDRESS**  
1300 S.E. 82nd Street  
Oklahoma City, Oklahoma 73149

**PHONE (405) 631-9756**  
**FAX (405) 632-2471**  
**2<sup>ND</sup> FAX (405) 631-0585**