PROJECT:

**BUILDING NAME & NUMBER**

**PROJECT TITLE**

UNIVERSITY OF IDAHO

Moscow, Idaho

UI PN#(UI Project Number)

OWNER:

**THE REGENTS, UNIVERSITY OF IDAHO**

Moscow, Idaho

DESIGN AGENCY

**Architectural & Engineering Services**

**Facilities Services**

University of Idaho

875 Perimeter Drive, MS2281

Moscow, Idaho 83844-2281

Phone: 208-885-6246

UI Project Manager: (insert name of UI PM)

DESIGN CONSULTANT

**Prime Architect or Engineer**

INSERT

IDAHO

STAMP

HERE

Address Line #1

Address Line #2

Phone:

Fax:

Email:

Primary Contact: (insert name of consultant PM)

DESIGN SUB-CONSULTANTS

Structural Engineer: Mechanical Engineer Electrical Engineer

**Engineer Name Engineer Name Engineer Name**

Address Line #1 Address Line #1 Address Line #1

Address Line #2 Address Line #2 Address Line #2

Phone: Phone: Phone:

Email: Email: Email:

DATES:

Pre-Bid Conference: (Insert Day of Week, Month, Day, Year, Time)

Bid Opening: (Insert Day of Week, Month, Day, Year, Time)

Substantial Completion: (Insert Number) Calendar Days from Notice to Proceed