



Plasterers' Local 200
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Pomona, CA 91768
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PROJECT REGISTRATION FORM

Date: _____

Project Name: _____

Address: _____

General Contractor: _____

Address: _____

Approximate Start Date: _____

Number of Plaster Workers: _____

Approximate # of Man Hours: _____

New Building
Tennant Improvement
Remodel

Cement
E.I.F.S.
Fireproofing
Interior

Company: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

Mail
Fax
Email