



# LIGHTNING ENGINEERING

4456 TAMIAMI TRAIL – SUITE B14

PORT CHARLOTTE, FL 33980

Ph: (941) 391-5980 or Fax: (941) 979-8195

E-mail: [orders@LightningEngineer.com](mailto:orders@LightningEngineer.com)

## CLIENT INFORMATION

Company \_\_\_\_\_ License # \_\_\_\_\_

Mailing Address (required) \_\_\_\_\_

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

Office Phone \_\_\_\_\_ Fax \_\_\_\_\_

Contact Person \_\_\_\_\_

Email \_\_\_\_\_ Cell \_\_\_\_\_

Alternate Contact: \_\_\_\_\_

Email \_\_\_\_\_ Cell \_\_\_\_\_

## JOB INFORMATION

Owners Name \_\_\_\_\_

Job Address \_\_\_\_\_

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

Parcel No. \_\_\_\_\_ County \_\_\_\_\_

## PLEASE SELECT ALL THAT APPLY

Residential Project \_\_\_\_\_ Single Family \_\_\_\_\_ Multi-Family \_\_\_\_\_ S.F. \_\_\_\_\_

Commercial Project \_\_\_\_\_ Single-Story \_\_\_\_\_ Multi-Story \_\_\_\_\_ S.F. \_\_\_\_\_

New Construction \_\_\_\_\_ Renovation \_\_\_\_\_ Add-On \_\_\_\_\_

Plan Revision \_\_\_\_\_ Other \_\_\_\_\_

ADDITIONAL INFORMATION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Method of Return: Mail \_\_\_\_\_ Pick-Up \_\_\_\_\_ E-Seal \_\_\_\_\_ Email a PDF \_\_\_\_\_

Please provide foundation plan, floor plan, elevation plan, electrical plan, truss plan and all other required plans. Please indicate specific additional requirements on this order form.