Logo or Nam	e of Arc	hitectural	Practice
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## **Project Team Directory**

Name of Project:	Project No.:
Name of Client:	Date Prepared:

Name of Client's Representative:

Address: Cellular: Telephone: E-mail:

Fax:

DISCIPLINE	Firm NAME	Representative
Architect		
Address		
Telephone		
Fax		
Cellular		
E-mail		
Structural Engineer		
Address		
Telephone		
Fax		
Cellular		
E-mail		
Mechanical Engineer		
Address		
Telephone		
Fax		
Cellular		
E-mail		
Electrical Engineer		
Address		
Telephone		
Fax		
Cellular		
E-mail		
Other Consultants		
Address		
Telephone		
Fax		
Cellular		
E-mail		