

**SMALL PROJECT PROFESSIONAL DESIGN SERVICES
INFORMATION SHEET QUALIFICATIONS STATEMENT
2021 Update**

Firm Name: _____ Mailing Address: _____ _____ _____ Street Address: _____ _____ _____	Contact Person: _____ Title: _____ Phone: _____ E- Mail Address: _____
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Please remember to include:

- Proof of **current** insurance coverage.
- Your firm's **current** license to practice in the State of Louisiana.