

CLIENT REFERENCE LIST
(Municipality or County)

All references must be from a Georgia (Municipality or County Government) who are able to comment on your firm's relevant experience.

REFERENCES:

1. Name: _____

Street Address _____

City, State, Zip _____

Contact Person _____ Title _____

Phone _____ Fax _____ Email _____

Property & Liability Service Currently Being Provided : Yes _____ or No _____

2. Name: _____

Street Address _____

City, State, Zip _____

Contact Person _____ Title _____

Phone _____ Fax _____ Email _____

Property & Liability Service Currently Being Provided : Yes _____ or No _____

3. Name _____

Street address _____

City, State, Zip _____

Contact Person _____ Title _____

Phone _____ Fax _____ Email _____

Property & Liability Service Currently Being Provided : Yes _____ or No _____