

COMPANY NAME:	
DATE:	

CONTRACTOR WORK EXPERIENCE

PROJECT NAME	DATE APPOINTED	CLIENT NAME	CONTACT PERSON (CLIENT)	PRINCIPAL AGENT	CONTACT PERSON (PRINCIPAL AGENT)	PROJECT VALUE	COMPLETION DATE OR EXPECTED
GARDENING	01-Jan-22	HPCSA	Ms ABC 012 123 4567	AV SOLUTIONS	Mr ABC 012 123 4567	R1 000 000,00	31-Dec-22

Page 1 Work experience

Example