



APPLICATION FOR VENDOR LIST

Company Name: _____ Federal Tax ID No.: _____

Address: _____

City, State, Zip: _____

Contact Name: _____ Telephone: _____

Email Address: _____

Number of years in business supplies items listed below: _____

***All invitations to Quote will be sent via email in PDF format; requests for hard copies in lieu of email will be considered on a case by case basis by the District.**

Check appropriate box for the materials, equipment, or supplies you are willing to supply and for which you would like to receive requests for quotes.

- A: Electrical Material, equipment and supplies
- B: Office furniture, materials, equipment and supplies
- C: Communication material, equipment and supplies
- D: Transportation materials, equipment and supplies
- E: Hydraulic (Hydroelectric) material, equipment and supplies
- F: Building and facilities material, equipment and supplies
- G: Other equipment and supplies Please list: _____

List references of supplying like materials:

Firm Name/Address: _____

Contact Name: _____

Telephone: _____

Firm Name/Address: _____

Contact Name: _____

Telephone: _____

Firm Name/Address: _____

Contact Name: _____

Telephone: _____

Print Name: _____

Signature: _____

Title: _____