



**VENDOR INFORMATION FORM**

**COMPANY INFORMATION**

Name of company as shown on W-9: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Extension: \_\_\_\_\_ Fax No: \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**BILLING INFORMATION (Remit to address if different from the above address)**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Tax ID Information (Must be completed and returned with your signed W-9 Form)**

Request for Taxpayer Identification and Certification (W-9) number: \_\_\_\_\_

**Check one if LLC:**

**Check one if not LLC:**

Type D - Disregarded entity

Individual / Sole Proprietor

Type C – Corporation

Corporation

Type P – Partnership

Partnership

**CERTIFICATION INFORMATION (Please select the appropriate certifications and include a copy with this form)**

**LOCAL & SMALL BUSINESS CERTIFICATION**

**MINORITY BUSINESS CERTIFICATION**

Select and provide Certification number (s):

Certification number: \_\_\_\_\_

District of Columbia \_\_\_\_\_

Minority Business Enterprise

GSA

Fairfax County \_\_\_\_\_

Federally Funded

Enterprise Zone

Montgomery County \_\_\_\_\_

Local Business Enterprise

Prince George’s County \_\_\_\_\_

Small Business Enterprise

Loudon County \_\_\_\_\_

Women Business Enterprise

Disadvantaged Business Enterprise

Open Market

Open Market with Preferred Points for Certified Local

and Small Business Enterprises