

## APPLICATION FOR INCLUSION ON BIDDERS/VENDOR LIST

COMPANY NAME \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ TITLE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

FEDERAL ID # \_\_\_\_\_ EMAIL \_\_\_\_\_

CONTRACTOR'S LICENSE# \_\_\_\_\_

(Contractor's Must be licensed to do work in the State of Tennessee)

LISTED LIABILITY INSURANCE \_\_\_\_\_

BRIEF DESCRIPTION OF BUSINESS:

\_\_\_\_\_  
\_\_\_\_\_

TYPES OF SERVICES COMPANY PROVIDES:

\_\_\_\_\_  
\_\_\_\_\_

TYPE OF MATERIALS SUPPLIED:

\_\_\_\_\_  
\_\_\_\_\_

MINORITY OWNED BUSINESS? YES \_\_\_\_\_ NO \_\_\_\_\_

WOMAN OWNED BUSINESS? YES \_\_\_\_\_ NO \_\_\_\_\_

SECTION 3 BUSINESS? YES \_\_\_\_\_ NO \_\_\_\_\_