City of Oroville

VENDOR LIST APPLICATION

Thank you for the interest expressed by your firm to be included on the City of Oroville Vendor List. To determine qualification of firms to provide services to the City, please complete information on this form and return to the City of Oroville, P.O. Box 2200, 1308 Ironwood, Oroville, WA 98844. Incomplete applications will not be processed. Information provided will be kept in confidence unless a matter of public record.

The City of Oroville is an equal opportunity employer.

PRE-QUALIFICATION REQUIREMENTS

Firms on the Vendor List must be able to show proof of ability to provide:

1.   Proof of appropriate Federal Tax ID #;

2.   Statement that contractor has no previous record of default in the performance of, or failed to complete, a written public contract, or has not been convicted of a crime arising from a previous public contract.

CITY OF OROVILLE
VENDOR LIST APPLICATION

*Company Name:*_____

Phone #: (_____)_____   *Application Date:_____*

*Mailing Address:*_____

Street Address: _____

Type of Ownership: _____   *Corporation*   _____   *Sole Proprietorship*

Minority & Women Owned Business: _____   *MBE*   _____   *WBE*

*Certificate #:*_____

*Federal Tax ID #:*_____

*Washington State Tax #:*_____

   Type of:

Materials provided: _____

Equipment provided: _____

Service provided: _____

Supplies provided: _____

Other (specify):   _____

   By signature below, I acknowledge that I have read and understand the requirements described in this application, and to the best of my knowledge, information provided is a true representation of the named firm's ability to perform any contracts which may result by submittal of this application.

_____

Name & Title of Preparer (print)   *Signature & Date*