
Preferred Vendor Application Form

Company Name _____
Address _____
City/State/Zip _____
Phone _____ Fax _____
CEO Name _____ CEO Title _____
CEO E-mail _____ CEO Phone _____
Federal Tax ID Number _____

COMPANY INFORMATION

Organization Type: Sole Owner Corporation S-Corp.
State of Incorporation? _____ Nonprofit? Yes No
Is your company owned by a parent company? Yes No
Parent Company Name _____
Parent Company Address _____
Parent Company Tax ID _____
Are you: Small Business? Minority-Owned Business? Veteran-Owned
Business? Women-Owned Business? Veteran Disabled-Owned Business?
Certifications: 8a Certified? Minority? Women-Owned? HUBZone?
Tennessee Licenses held _____
Contact Information _____ Phone Number _____
Does your company accept credit cards? Yes No
Primary Standard Industrial Code _____
Additional SICs _____
Primary North American Industry Classification System Code (NAICS) _____
Experience in underground utility construction Yes No Yrs. Exp.
Familiar with Zoeler or E-1 grinder pumps Yes No Yrs. Exp.
Company's Web Site(s): _____
FSCM/Cage Code _____

Signature

Date