

Vendor Application

PURCHASING DIVISION

LEE COUNTY

PO Box 1968

Sanford, NC 27330

Phone: (919)-718-4600

Fax: (919)-718-4631

Please fill out this form and send by e-mail to cconfair@leecountync.gov or fax to (919) 718-4631. Your business will be added to our new vendor list.

Please Type or Print Legibly

Federal ID # _____ SS# _____

For Finance Use Only	Vendor #
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<u>Vendor Name</u>

<u>Date</u>

ORDER ADDRESS		PAY ADDRESS	
<u>Street</u>		<u>Street</u>	
<u>Street</u>		<u>PO Box</u>	
<u>City</u>		<u>City</u>	
<u>State</u>	<u>Zip Code</u>	<u>State</u>	<u>Zip Code</u>

<u>CONTACT PERSON</u>	<u>TELEPHONE NUMBER</u>	<u>FAX NUMBER</u>
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<u>CONTACT PERSON E-MAIL ADDRESS</u>	<u>TERMS</u>	<u>DISCOUNT</u>
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<u>CONTRACTOR'S LICENSE # (if applicable)</u>	<u>SIGNATURE</u>
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This firm certifies that it is a : (if applicable)

_____ Disabled _____ Minority Business Enterprise _____ Women Business Enterprise

To qualify for MWBE status, 51% of the company must be owned and controlled by minority groups or women. For the purpose of this definition, minority group members are Black Americans, Hispanic Americans, American Indians and/or American Women. To qualify for Disabled status, 51% of the company must be owned and controlled by disabled persons.

Product(s) and/or Service(s)

Please list the type product(s) and/or Service(s) that your company can provide.
