

<b>VENDOR FILE APPLICATION</b>		BROOME COUNTY DIVISION OF PURCHASING P.O. BOX 1766 BINGHAMTON, NY 13902-1766
COMPANY NAME:		
CONTACT PERSON:		
MAILING ADDRESS:		
TELEPHONE:	EMAIL:	FAX:

**GOODS AND PROFESSIONAL SERVICES**

Broome County does not have a set list of commodities in its vendor database. Please list the goods And/or services supplied by your company:	

**CONSTRUCTION**

Please provide a list of construction work provided by your company:	

Construction only: Our business meets the Criteria of being a minority business.	Yes_____	No_____
The information above is correct to the best of my knowledge.	By_____	Date_____

1) PLEASE INDICATE YOUR BONDING CAPACITY AND PROVIDE US WITH A COPY OF YOUR CURRENT 'CERTIFICATE OF INSURANCE'.

2) PLEASE PROVIDE US WITH A CURRENT W-9 REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION FORM, COMPLETE WITH ORIGINAL SIGNATURE. WE MUST HAVE THIS ON FILE TO ALLOW FOR PROCESSING OF REQUISITIONS, PURCHASE ORDERS, AND PAYMENT REQUESTS.