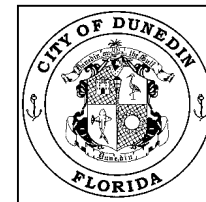


CITY OF DUNEDIN VENDOR APPLICATION



PLEASE TYPE OR PRINT
RETURN TO:

PURCHASING SECTION
CITY OF DUNEDIN
P.O. BOX 1348
DUNEDIN, FLORIDA 34697-1348

CHUCK ANKNEY, PURCHASING MANAGER

PH: 727-298-3077

FAX: 727-298-3078

COMPANY NAME					FEDERAL TAX ID # OR SOCIAL SECURITY	
ORDER ADDRESS	CITY	STATE	ZIP CODE	PHONE	FAX:	E-MAIL
BID ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP CODE	PHONE	FAX	E-MAIL
PAY NAME / ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP CODE	PHONE	FAX	E-MAIL
CONTACT PERSON (S) FOR BIDS & CONTRACTS (NAME & PHONE)		ORGANIZATION TYPE		MINORITY BUS		PAYMENT & DISCOUNTS
		INDIVIDUAL <input type="checkbox"/>		NO <input type="checkbox"/>		NET 30` <input type="checkbox"/>
		CORPORATON <input type="checkbox"/>		YES <input type="checkbox"/>		2% - 10 DAYS <input type="checkbox"/>
		PARTNERSHIP <input type="checkbox"/>		TYPE		OTHER / SPECIFY
CONTACT PERSON FOR BILLING INQUIRIES (NAME & PHONE #)		OTHER <input type="checkbox"/>				
		SPECIFY				
INDICATE TYPE OF SERVICE OR PRODUCT YOU PROVIDE AND WISH TO BID / QUOTE						
<p>I certify that the information supplied herein, including all pages attached, is correct and that neither the applicant nor any person for concern in any connection with the applicant as a principal or officer so far as is known, is now debarred or otherwise declared ineligible by the City of Dunedin to bid on furnished materials, supplies, or services for the City or any agency thereof:</p> <p>NOTE: Failure to respond to three consecutive bid requests may be cause for suspension from bidders mailing lists. All applications are subject to review and investigated prior to validation for placement on approved bidders mailing lists.</p>						
SIGNATURE				TITLE		DATE