

## Berkeley County Bidder/Vendor Application Form

**Mail to:**

Berkeley County Purchasing Department  
 PO Box 6122  
 Moncks Corner, South Carolina 29461-6120  
 (843) 761-6900 Ext 4118 (843) 723-3800 Ext 4118 (843) 576-3136 Ext 4118

This space for use by agency  
**Vendor Number**

**Acceptance Date**

<b>Initial Application</b>	<b>All Answers Should be Typed or Printed</b>	<b>By:</b>
<b>Revision</b>		

<b>Name of Applicant</b>	<b>Phone # (      )</b>
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<b>Address to Which Bidding Forms and Purchase Orders are to be Mailed</b>	<b>FAX # (      )</b>
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<b>Address to Which Payments are to be Mailed</b>	<b>How Long in Present Business</b>
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<b>Type of Organization (Check One)</b> <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation	<b>If incorporated, Indicate in Which State</b>	<b>Small/Minority Business</b>
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**Names of Officers, Members or Owners of Concern, Partnership, etc.**

<b>(A) President</b>	<b>(B) Vice President</b>
<b>(C) Secretary</b>	<b>(D) Treasurer</b>
<b>(E) Owners or Partners</b>	<b>Dun &amp; Bradstreet Rating (if available)</b>

**Persons of Concerns Authorized to Sign Bids and Contracts in your Name (if agent, so specify)**

Name	Official Capacity

**Persons to Contact on Matters Concerning Bids and Contracts (if agent, so specify)**

Name	Official Capacity	Telephone Number

**Please List on Page 2, Class Codes of Equipment, Supplies, Material, and/or Services on which you Desire to Bid.**

**Category (Check below the category which applies to the applicant)**  
 (A) Manufacturer or Producer     (B) Retailer     (C) Distributor     (D) Wholesaler     (E) Mfgr's Agent     (F) Service Establishment

**Federal Tax ID Number (FEIN)** \_\_\_\_\_  
**If FEIN is Social Security Number** \_\_\_\_\_  
**S.C. Sales Tax Registration Number** \_\_\_\_\_

I certify that the information supplied herein (including all pages attached) is correct and that neither the applicant or any person (or 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 any public agency from bidding for furnishing materials, supplies or services to any agency thereof.

\_\_\_\_\_

Signature of Person Authorized to sign this Application

\_\_\_\_\_

Name and Title of Person Signing (Please Type or Print)

