



DECATUR UTILITIES
 PO BOX 2232
 DECATUR, AL 35609
 (256) 552-1440 phone
 (256) 552-1412 fax

VENDOR LIST APPLICATION

INSTRUCTIONS: Please provide all information requested. You may attach any brochures that best describe your product or service.
 PLEASE PRINT OR TYPE

 Name of Company or Applicant if Individual

 Federal ID Number or Social Security Number

 Street Address

 Mailing Address

 City State Zip

 City State Zip

(____) _____
 Phone Number Fax Number

 If Incorporated, Indicate in Which State

 Remittance Address

 City State Zip

Billing Contact: _____
 Payment Terms _____

 Name

 Email Address

(____) _____
 Telephone Number

(____) _____
 Fax Number

PERSONS AUTHORIZED TO SIGN BIDS AND CONTRACTS IN YOUR NAME (IF AGENT, SO SPECIFY)

 Name

 Official Capacity

 Name

 Official Capacity

City of Decatur Business License # _____

State of Alabama Business License # _____

CATEGORY (Check below the category which applies to the applicant)

Manufacturer Retailer Wholesaler Service Construction Consulting Other (Specify) _____

List goods or services you would be interested in bidding on: _____

List last three (3) similar projects completed within previous seven (7) years, approximate cost, contacts and phone numbers:

Attach W9

Attach updated Certificate of Insurance showing:

General Liability \$1,000,000 per occurrence, \$2,000,000 aggregate

Auto Liability \$1,000,000 per occurrence

Workers Comp \$500,000 minimum

I certify that the information supplied herein (including all pages attached) is correct and that neither the applicant nor 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

Date of Signing

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

FOR DU USE ONLY:

Date Received: _____

Date Approved: _____

Approved By: _____