

VENDOR APPLICATION
CITY OF SANDY SPRINGS
PURCHASING DIVISION

7840 Roswell Rd.
Bldg. 500
Sandy Springs, GA 30350
e-mail: tyra.little@sandyspringsga.org

TELE: (770) 730-5600
FAX: (770) 206-1480

New Applicant **Name and/or Address Change** **Add Commodities** **Delete Commodities**

ADDRESS: (COMPLETE NAME OF BUSINESS)		FEDERAL I.D.# OR SOCIAL SECURITY #:
MAILING ADDRESS:	REMITTANCE ADDRESS:	
CITY/STATE/ZIP:		ZIP CODE:
TELEPHONE NUMBER:		FAX NUMBER:
NAME OF REPRESENTATIVE(S) SERVING THE CITY OF SANDY SPRINGS: _____		
CAN WE REQUEST QUOTES/COMMUNICATE VIA E-MAIL? <input type="checkbox"/> YES <input type="checkbox"/> NO IF SO, PLEASE INDICATE E-MAIL ADDRESS: _____		
TYPE OF BUSINESS OR ORGANIZATION (CHECK):		LENGTH OF TIME IN PRESENT BUSINESS (NUMBER OF YEARS):
<input type="checkbox"/> DEALER	<input type="checkbox"/> MANUFACTURER	_____
<input type="checkbox"/> JOBBER	<input type="checkbox"/> RETAILER	_____
<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> PARTNERSHIP	_____
<input type="checkbox"/> MINORITY	<input type="checkbox"/> SMALL BUSINESS	_____
<input type="checkbox"/> FACTORY REP.	<input type="checkbox"/> COMMODITY	_____
<input type="checkbox"/> INCORPORATED	<input type="checkbox"/> OTHER	_____
NAME OF OFFICERS, OWNERS OR PARTNERS OF BUSINESS:		
PRESIDENT _____	VICE-PRESIDENT: _____	
SECRETARY: _____	TREASURER: _____	
OWNERS/PARTNERS: _____		
DISTRIBUTION (LOCATION OF NEAREST PLANT/WAREHOUSES)	INVOICING TERMS (i.e. NET 30 DAYS, ETC.)	
_____	_____	
ATTN: ALL ITEMS FOR THE CITY OF SANDY SPRINGS MUST BE QUOTED F.O.B. DESTINATION		
NAME AND TITLE OF PERSONS AUTHORIZED TO SIGN BIDS. THE LIST MUST BE KEPT CURRENT		
_____	TITLE: _____	
_____	TITLE: _____	
_____	TITLE: _____	
PLEASE INDICATE ON THE ATTACHED LIST OF COMMODITIES/SERVICES FOR WHICH YOUR COMPANY IS INTERESTED IN SUBMITTING QUOTES, BIDS AND PROPOSALS		
IT WILL BE THE RESPONSIBILITY OF EACH BIDDER TO NOTIFY THE CITY OF SANDY SPRINGS OF ADDRESS OR TELEPHONE NUMBER CHANGES. PLEASE SEND CHANGES AND THIS COMPLETED FORM TO:		
CITY OF SANDY SPRINGS – PURCHASING DIVISION		
7840 Roswell Rd. Bldg. 500		
Sandy Springs, GA 30350		
I certify that the foregoing information is a full, true and correct statement of facts. I understand that my failure to respond to three (3) Bid Invitations of any one class will result in the City of Sandy Springs Purchasing Division discontinuance in sending future bid invitations on that particular commodity.		
SIGNATURE	TITLE	DATE