

<u>Vendor/Subcontractor List – Diversity in Contracting – Introduction</u>

Buckeye CableSystem is dedicated to developing and maintaining diversity with vendors and subcontractors with whom we contract for projects within Buckeye CableSystem. We recognize that a diversified vendor and subcontractor supply generates creative thinking, ideas and results.

Vendor/subcontractor diversity is not a project or a program, but rather the way that we conduct business. We believe strongly in providing equal opportunity to all qualified vendors and subcontractors who participate in the bid process. We strive to facilitate nondiscriminatory business opportunities for female and minority owned businesses.

We encourage all vendors and subcontractors to complete the Diversity Vendor/Subcontractor Application below. We at Buckeye CableSystem will use this list in our search for expanding the companies that we use when various projects arise.

If we have a project involving a product or service that your company provides, we will contact you with further information regarding the next steps and provide you with further details.

If no current need exists for a vendor or subcontractor, the information that you provide will remain in our database **for up to two years** for use when the need arises.

Please print and complete the Diversity Vendor/Subcontractor Application below. Return via fax or postal service to:

William Schachner Buckeye CableSystem 5566 Southwyck Blvd. Toledo, OH 43614 Fax: 419-724-7074



VENDOR/SUBCONTRACTOR DIVERSITY APPLICATION FORM

BUSINESS INFORMATION

Business Name		
Business Address:		
CityState:	Zip	
elephone Number:Fax Number:		
Company Website Address:		
Legal Structure:		
☐Sole-Proprietorship ☐Joint Venture	☐Corporation ☐Partnership ☐Other	
Primary Business Function:	Landscaping	
Carpet/Flooring Copy Machine/Repair Construction Dry Wall Electrical Fire Extinguisher/Suppression HVAC Construction Irrigation Lawn mowing	Janitorial Janitorial Painting Pest Control Plumbing Snowplowing Roofing Vending Machine Supplier Window Cleaning Other	
Please briefly describe the nature of you	ır business:	
Please briefly describe the job that you a	are bidding on:	
Is your company tax exempt? Tyes	No Federal Tax ID Number:	

Can you provide a Certificate of Liability Insurance? ☐Yes ☐No		
Can you provide a Worker's Compensation Certificate? ☐Yes ☐No		
Name of CEO/President/Owner:		
CONTACT INFORMATION		
Name of Contact Person:		
Telephone Number:		
DIVERSITY INFORMATION		
Is your company 51% Owned or Operated by a Minority Group? ☐Yes ☐No		
If yes, check the ethnic category and indicate % of ownership:		
American Indian/Alaskan Native% African American% Hispanic% Asian/Pacific Islander% Other%		
Is your company 51% Owned or Operated by Women? ☐Yes% ☐No		
Is your company certified as a minority, disadvantaged, or women-owned business by an agency or association? Yes No If yes, please name the entity or attach a copy of your certification:		
BUSINESS REFERENCES		
Reference One:		
Business Name:		
Business Address:		
City: State: Zip:		
Telephone Number:		
Reference Two:		
Business Name:		

Business Address:		
City:	State:	Zip:
Reference Three:		
Business Name:		
Business Address:		
City:	State:	Zip:
Telephone Number:		