



VENDOR REGISTRATION FORM

Vendor is solely responsible for providing accurate and up-to-date information. Check the "EXISTING VENDOR" box if you are updating information, otherwise check the "FIRST-TIME VENDOR" box. After completing the form, click "SUBMIT" at the bottom of the page and your information will be added to or updated on the District's Vendor Database.

FIRST-TIME VENDOR

EXISTING VENDOR

GENERAL BUSINESS INFORMATION

Federal ID # or Social Security #

Reporting Number Individual/Independent Contractor/Sole Proprietor

Full Name of Business

Address

City State Zip

County Website Address

Type of Service Provided

Brief Description of Services

CONTACT FOR SOLICITATION NOTIFICATIONS

Name Title

Phone ext. Fax

Alt. Phone ext. Email

BUSINESS CLASSIFICATIONS

- Minority-Owned Business Enterprise Disadvantaged Business Enterprise
- Woman-Owned Business Enterprise Small Business Enterprise

California Contractor Type License # Expires

MISCELLANEOUS INFORMATION

Number of Employees in Business How did you hear about Central Basin MWD:

Number of Years in Business

Newsletters Facebook
Website Twitter

Other Source (specify):

For CBMWD use only:

Notes: _____

Date Received: _____