



HOWARD COUNTY, MARYLAND
Office of Purchasing

New Vendor Information

New vendors with Howard County, Maryland are required to provide the following information as well as a W-9 form.

1. PURCHASE ORDER ADDRESS:

Name: _____

Federal Tax Identification or Social Security No.: _____

Street Address: _____

City, State, Zip Code: _____

Phone: _____ Fax: _____ Email: _____

2. REMITTANCE ADDRESS (if different than above):

Name: _____

Street Address: _____

City, State, Zip Code: _____

3. MINORITY OWNERSHIP (if applicable): Is the company a Minority-, Female-, or Disabled-Owned Business Enterprise? NO YES, If "Yes", please answer 3a.

3a. Is the company certified? NO YES If "Yes", please check below and answer 3b., if "No", please call 410-313-6370 to find out how to become certified and skip 3b.:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> American Indian Female | <input type="checkbox"/> Disabled Female | <input type="checkbox"/> Far Eastern Female | <input type="checkbox"/> Near Eastern Female |
| <input type="checkbox"/> American Indian Male | <input type="checkbox"/> Disabled Male | <input type="checkbox"/> Far Eastern Male | <input type="checkbox"/> Near Eastern Male |
| <input type="checkbox"/> Black Female | <input type="checkbox"/> Eskimo/Aleutian Female | <input type="checkbox"/> Hispanic Female | <input type="checkbox"/> White Female |
| <input type="checkbox"/> Black Male | <input type="checkbox"/> Eskimo/Aleutian Male | <input type="checkbox"/> Hispanic Male | |

3b. Name of Certifying Agency: _____
(i.e. MDOT , City of Baltimore, Howard County, etc.)

Certification Number: _____ Expiration Date: _____

4. ORGANIZATION:

- Individual (Sole Proprietorship)
- Partnership
- Corporation
- Joint Venture
- Association
- LLC/LPP

5. TYPE OF BUSINESS:

- Wholesale Distributing
- Manufacturing or Production
- Retail Dealer
- Service Organization
- Contractor
- Other: _____

This form may be emailed or faxed to: _____

*****PLEASE REMEMBER TO ATTACH W-9 WHEN RETURNING THIS FORM*****