



CITY OF MADISON

100 Hughes Road, Madison, AL 35758
Telephone No.: (256) 772-5667; Fax No.: (256) 772-5649
Website: www.madisonal.gov

Vendor-Bidder Application

(Please print or type)

Company Name:			Date:		
Physical Address:					
City		State		ZIP	
Remittance Address:					
City		State		ZIP	
Telephone No.: ()			Fax No.: ()		
Company Website:			Email:		
City of Madison Business License No:			Year Company Established:		

Please check (✓) question(s) that apply to your company:

- | | | |
|---|-----|----|
| ➤ Is your company a Small Business (SB)? | Yes | No |
| ➤ Is your company a Minority/Socially and Economically Disadvantaged Business (SDB)? | Yes | No |
| ➤ Is your company operating or manufacturing in Alabama? | Yes | No |
| ➤ Is your company distributing foods manufactured in the United States? | Yes | No |
| ➤ Does your company accept verbal or electronically submitted purchase orders? | Yes | No |
| ➤ Does your company require written confirmation of telephone orders? | Yes | No |
| ➤ Does your company have capability of electronic data interchange? | Yes | No |
| ➤ Does your company have a minimum purchase order requirement of dollar amount? _____ | Yes | No |

Please check (✓) all that apply to your company:

Retailer
 Manufacturer
 Wholesaler
 Distributor
 Authorized Service
 Representative

List officer(s), member(s) or owner(s) of company, partnership, etc.:

Name: _____ Title: _____

Name: _____ Title: _____

The undersigned certifies that all information provided is correct to the best of his/her knowledge.

Name: _____ Title: _____

Signature: _____ Date: _____



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List type(s) of service(s) offered: _____
