## Town of East Hampton – Accounting Department 20 East High Street East Hampton, CT 06424 860-267-7548



Vendor Registration Application

1. Company Name and Address for Bids and Purchase Orders:					
(This name will be used on purchase orders and checks issued to your company.)					
Legal Business Name					
Doing Business As (if same as above, leave blank)					
Street Address					
City	State	Zip Code			
2. Invoice Remittance Address (where check should be mailed) (If same as above, leave blank)					
Street Address					
City	State	Zip Code			
3. Taxpayer Identification Number (FEIN/SSN):					
Taxpayer ID#:	FEIN	SSN			
4. Organization Type (Check One):					
Individual Partnership Non-Profit Corporation LLC Corporation LLC Partnership LLC Single Member Entity					
5. Vendor Contact Information: The contact person(s) to reach for Bids, Purchase Orders and Invoice questions:					
Contact Person(s)					
1 <sup>st</sup> Telephone Number		2 <sup>nd</sup> Telephone Number			
FAX Number		E-mail			

6. Agent, Representative or Employee Authorized to Transact Business on Behalf of the Entity / Firm				
Name				
Title				
7. Minority Business:				
Is your business currently a Connecticut DAS certified Minority Business?				
YES (Attach copy of certificate) NO				

**Applicant's Certification:** The undersigned hereby certifies that the foregoing information is a true and correct statement of the facts and agrees to abide by the laws of the State of Connecticut. Applicant acknowledges that it is his/her responsibility to keep the information current by notifying the East Hampton Accounting Department of any changes.

SIGNATURE OF PERSON AUTHORIZED TO SIGN THIS APPLICATION
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NAME & TITLE	NAME	&	TIT	ĽΕ
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DATE

## Instructions to vendor:

Please type or print legibly **all** information requested and fax or remit to the following address. Failure to complete this application in its entirety may delay the Town issuing purchase orders and/or checks to your company.

Town of East Hampton Accounting Department 20 East High Street East Hampton, CT 06424 (P) 860-267-7548 (F) 860-267-1027

The Town of East Hampton reserves the right to make whatever investigation deemed advisable prior to adding the applicant to our purchasing system.