

**COUNTY OF YORK
PURCHASING DEPARTMENT
28 EAST MARKET
YORK, PA 17401
(717) 771-9269
FAX (717) 771-9226**

BIDDERS LIST APPLICATION FORM

The undersigned, as an authorized representative of the firm, company, or establishment referred to herein, requests to be added to the bidders list for the item(s), material(s) or service(s) noted. The form is completed fully and accurately. I acknowledge that failure to provide full and complete information in an accurate manner is cause for my removal from the bidders list.

Please Print or Type

I. GENERAL

A. Company Name _____

B. Address _____

(Street)

(City/State)

(Zip)

C. Date _____

D. Person Completing Application _____

E. Corporate Phone Number(s) _____, _____

II. COMPANY HISTORY

A. Date Incorporated _____

B. Home Ofc./Headquarters Address _____

(Street)

(City/State)

(Zip)

C. Total Sales Last Year _____

D. Number of Employees _____

III. CONTACT PERSONNEL

A. President or Chief Executive _____

(Name)

(Title)

B. Sales Representative _____

(Name)

(Title)

IV. INSURANCE

A. Name of Primary Carrier _____

B. Amount of Workers Comp Insurance _____

C. Amount of General Liability Insurance _____

V. PRINCIPAL CUSTOMERS AND ADDRESS/PHONE NUMBER

A. _____

B. _____

VI. SUBCONTRACTING

A. Does your firm usually subcontract? _____ Yes _____ No

B. Firms you subcontract with:

1. _____

2. _____

3. _____

VII. ITEMS, MATERIALS, SERVICE

Please list below what your firm desires to provide to the County of York, along with a brief explanation of source, manufacturer, and quality.

A. _____

B. _____

C. _____

D. Does this firm have a quality assurance program?

____ Yes ____ No (If so, please outline):

E. What are the terms of sale? _____

F. Do you currently hold any State Contracts available to Municipal Subdivisions in the Commonwealth of Pennsylvania?

_____ If yes, please provide the contract numbers and titles in an attachment.

VIII. AUTHORIZATION

A. Name, title and signature of authorized agent submitting this application.

(Name)

(Title)

(Signature)

(Date)

Corporate Seal