

166 South High Street
501 Municipal Building
Akron, OH 44308
330-375-2060
330-375-2213 Fax



Jerry Roberts
Acting Purchasing Agent
PURCHASING DIVISION

Donald L. Plusquellic
Mayor

Attention Vendors Vendor Application for Registration

To complete the Vendor Application, please list the commodities or services that you supply on page three.

Upon receipt of your application, and review of our needs, you **may** be eligible to **receive requests for quotations for commodities or services you provide**. Purchases over Fifteen Thousand Dollars are advertised in the legal section of the Akron Beacon Journal on Mondays and Saturdays of each week.

Purchases are normally made from firms located in the City of Akron whenever it is cost effective.

Special care should be taken in completing the application to assure that you receive only invitations for commodities or services for which you are a qualified vendor. This is most important since failure to respond to three (3) consecutive bid invitations will cause your name to be removed from the vendor file.

Vendors who are at least fifty-one percent (51%) owned and controlled by either minority or female persons are encouraged to identify themselves in section 9 of the application for registration in the City of Akron Minority Business Enterprise (MBE), and/or Women's Business Enterprise (WBE) Programs.

Ability to deliver and maintain products and services in a timely and reliable fashion are critical factors in the City's purchasing process. We also check references, so please include a list with your application. Also please note: Include local representative's names, addresses and phone numbers.

If you have any questions or require additional assistance, please contact me at the number listed above.

Respectfully,

Jerry Roberts
Acting Purchasing Agent

Vendor's Application
for
The City of Akron, Ohio
166 South High Street #501
Akron, OH 44308
(330) 375-2060 phone (330) 375-2213 fax

Date **Federal ID# or Social Security #**

New Application **Change of Name/Address**

1. Applicant's Name and Mailing Address

2. Mailing Address for Payments *(if different from #1)*

**Email
Website**

**Fax
Cell Phone**

3. Type of Organization

Individual Partnership Non-Profit Organization Corporation
If so, incorporated under the laws of what state?
If a Corporation or Partnership, please complete section #8.

4. How long in present business?

5. Persons authorized to sign bids, offers and contracts (Indicate if Agent):

NAME	OFFICIAL CAPACITY	TELEPHONE	FAX

6. Type of Business

Manufacturer	Construction
Factory Representative	Unlimited General Contractor
Wholesale Dealer	Limited Sub-Contractor
Retail Dealer	
Service Establishment – Define	
Other - Define	

7. Equipment Service Information

Location of Service Operation
Identity of Equipment Mfr.
Are you an authorized factory representative? Y N

8. Corporations and Partnerships – Please supply the following...

- President
- Vice-President
- Secretary
- Treasurer
- Owner or Partners
- Affiliates of Applicant (Names, locations and nature of affiliation, if any)

9. Proof of State of Ohio Certification Minority Business Enterprise (MBE) / Women's Business Enterprise (WBE) status, Articles of Incorporation or Business Ownership.

Minority-owned and Women-owned vendors are encouraged to participate in the City of Akron MBE and/or WBE Programs. Please contact the City of Akron Office of Contract Compliance at (330) 375-2189 for further information.

State of Ohio MBE Submit Certified Date:
WBE Submit Article of Incorporation showing 51% WBE ownership:

List the name of your insurance company Insurance company telephone and fax Amount of liability insurance coverage Amount of property insurance

List of Reference/Clients (Optional)

Name	Address	Phone

PLEASE LIST THE COMMODITIES THAT DESCRIBE YOUR SERVICES AND/OR SUPPLIES. PLEASE PRINT OR TYPE YOUR REPLY. THANK YOU.

I hereby certify that the information supplied herein is correct. *(Print or Type Name and Title)*

GENERAL INFORMATION

Persons or concerns interested in being added to the City of Akron's vendor mailing list must file this application with the Purchasing Division.

After placement on the bidder's mailing list, a supplier's failure to respond (submission of bid, or notice in writing that you are unable to bid on a particular transaction but wish to remain on the active bidder's mailing list for that particular item) to invitations for bids, requests for proposals or requests for quotations will be understood by the City of Akron to indicate lack of interest and concurrence in the removal of the supplier's name from the bidder's mailing list for the items concerned.

Please notify the City of Akron Purchasing Division immediately of any changes. This includes change of name, address or telephone number, changes in personnel listed on this application and addition or deletion of items you are interested in providing.

DEFINITIONS RELATED TO ITEM 8:

Owners: Those persons or concerns having a financial interest of five percent (5%) or greater.

Affiliates: *Business* concerns are affiliates of each other when either direct or indirectly:

- (a) One concern controls or has the power to control the other, or
- (b) A third party controls or has the power to control both. In determining whether concerns are independently owned and operated and whether or not affiliation exists, consideration is given to all appropriate factors including common ownership, common management, and contractual relationship.