

VENDOR PROPOSAL FORM

Instructions: Please complete and submit this Vendor Proposal Form with your application signed by the Project Director for the application and the entity's Authorizing Official.

Bidder/Proposer's Legal Entity Name:	
Business Name, if different from above:	
Employer Identification Number:	
Principal Place of Business:	
Authorizing Official	
Name:	Title:
Email:	Phone Number:
Project Director	
Name:	Title:
Mailing Address:	
E-mail:	Phone Number:
Certifications	
As Project Director, I certify that all information provided in this application is correct and accurate to the best of my knowledge.	

Signature of Project Director	Date
As the Authorizing Official for the entity submitting this application, I am supportive of this application and commit my organization to fully engaging in the work plan provided in this application.	

Signature of Authorizing Official	Date