

COUNTY OF MCKINLEY

Contracting Procurement Office

P.O. Box 70

Gallup, NM 87301

Phone: (505) 722-3868

Fax: (505) 863-6362

BIDDERS MAILING LIST APPLICATION

Name of Business:		Federal ID or SS #:		Date of Application:	
Mailing Address:			City, State, Zip:		Telephone Number: ()
Physical Address:			City, State, Zip:		Fax Number: ()
New Mexico Contractors #:		How Long in Present Business?:		NM State CRS Tax #:	
Type of Business <input type="checkbox"/> Manufacturer/Producer <input type="checkbox"/> Wholesaler <input type="checkbox"/> Retailer <input type="checkbox"/> Contractor <input type="checkbox"/> Jobber <input type="checkbox"/> Manufacturer's Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Authorized Dealer <input type="checkbox"/> Service Establishment					
Type of Organization: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation If incorporated when and in which state:					
Check Appropriate Boxes if Minority Owned: <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian-American <input type="checkbox"/> Female <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Other _____ <input type="checkbox"/> Male					
Owners or Partners:			Name of Person to Contact on Matters Concerning Bids and Contracts:		
Does your firm hold a New Mexico Pricing Agreement <input type="checkbox"/> Yes <input type="checkbox"/> No					
From the attached Commodity List Book, indicate the Class and Group Number for which you wish to receive Invitations to Bid. Your choices should be only those products/services you can furnish. Please make your list in numerical order following the Commodity List Book. You may use additional sheet if necessary.					
Class _____	Group No. _____	Class _____	Group No. _____	Class _____	Group No. _____
Class _____	Group No. _____	Class _____	Group No. _____	Class _____	Group No. _____
Class _____	Group No. _____	Class _____	Group No. _____	Class _____	Group No. _____
Class _____	Group No. _____	Class _____	Group No. _____	Class _____	Group No. _____
Class _____	Group No. _____	Class _____	Group No. _____	Commodities no found:	
Class _____	Group No. _____	Class _____	Group No. _____	_____	
Class _____	Group No. _____	Class _____	Group No. _____	_____	
Class _____	Group No. _____	Class _____	Group No. _____	_____	
Class _____	Group No. _____	Class _____	Group No. _____	_____	
Certification: I hereby certify that all statements made in this application are true and complete to the best of my knowledge and I understand that misrepresentation of material facts will cause forfeiture of my rights to bid with the County Purchasing Office.					
_____ Authorized Signature			_____ Official Title		_____ Date