



Office of Purchasing
10910 Clarksville Pike, Ellicott City, Maryland 21042
(410) 313-6600, fax (410) 313-6789

Supplier Registration Application

Supplier Information NOTE: Supplier name and ID number must be as filed with the Internal Revenue Service (IRS)

Legal Business Name: _____

DBA (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Customer Service/Sales Contact Person: _____

Phone: _____ Fax: _____

Mailing Address for **Purchase Orders** (if other than above):

Website Address for **emailing** Purchase Orders (if applicable): _____

Number of Years in Business: _____ Net Worth: _____ Gross Sales: _____

Type of Ownership (Check One)

Corporation Partnership Sole Proprietor Non-Profit Limited Liability Corporation (LLC)

Federal Tax ID Number: _____ State Incorporated: _____

1099 Information

1099 Vendor: Yes No

Taxpayer/Employee Identification Number (TIN/EIN/SSN): _____

Remit To for Accounts Payable (If different from above)

Vendor Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____ Phone: _____

Minority Business Classification (Mark all that apply)

African American

Alaska Native

Asian American

Disabled

Native American

Hispanic American

Woman

None

Are you certified by the State of Maryland as a Minority Business Enterprise (MBE) Entity: Yes No

If yes, Maryland Department of Transportation Certification #: _____

Type of Business and/or Service (Please check only one box that best indicates type of business)

Administrative, Financial, Benefits &
Management Services

Medical/Health Equipment, Supplies & Services

Arts, Crafts, Music, Entertainment & Theatre

Miscellaneous Commodities & Services

Assessments, Surveys, Testing & Sampling
Equipment & Services

Office Supplies, Related Items & Services

Athletic – Physical Education & Other Outdoor
Equipment & Services

Paper, Printing Equipment & Related Products &
Services

Clothing, Textiles & Related Supplies

Personnel & Related Services

Communication, Networking Equipment &
Services

Professional Development - Training Services

Computers, Software, Supplies & Services

Professional Services – Architectural, Engineering,
Legal & Other Consulting Services

Construction – New & Renovation

Rental & Leasing Services

Curriculum – Textbooks, Instruction & Related
Services

Roadway Materials & Related Equipment

Custodial – Janitorial & Cleaning Equipment,
Supplies & Services

Safety, Environmental & Protection Equipment &
Related Services

Data Management & Related Services

School & Library Equipment, Supplies & Services

Electric, Natural Gas, Water and Sewer &
Related Services

Science/Laboratory Equipment, Supplies & Services

Food, Appliances, Other Equipment, & Related
Services

Special Education Related Services

Furniture & Related Services

Transportation Services

Grounds – Agricultural Equipment & Related
Products & Services

Vehicles, Automotive Products & Services

Maintenance & Repair of Equipment –
Electrical, HVAC, Plumbing & Related Services

Certification

I/We, the undersigned, hereby certify that the information contained on this application is true and correct statement of facts. I/We further certify that the undersigned shall abide by and be subject to all applicable federal, state, and local laws and regulations pertaining to any subsequent contract that may be issued.

Typed Name : _____ Title: _____

Signature: _____ Date: _____

Return this form to:

Howard County Public School System
Purchasing Office
10910 Clarksville Pike
Ellicott City, MD 21042

Fax: 410 313 6789

Email: Purchasing@hcpss.org

Please attach or send a current IRS W-9 Tax Form