

Catawba County, P.O. Box 389, Newton, NC 28658

Vendor/Supplier Information Form  
And Substitute W-9 Request for Taxpayer  
Identification Number and Certification

Sole Proprietorship    Partnership    Incorporated    LLC    Gov. Entity    Other \_\_\_\_\_

|                    |              |            |
|--------------------|--------------|------------|
| _____              | _____        | _____      |
| Name on IRS Record | Phone Number | Fax Number |

|                                                                      |              |            |
|----------------------------------------------------------------------|--------------|------------|
| _____                                                                | _____        | _____      |
| Company DBA Name – <i>Payments will be made payable to this name</i> | Phone Number | Fax Number |

W-9 or 1099 Address (PO box #, street, apt. or suite #, city, state, \_\_\_\_\_)      9-digit zip required \_\_\_\_\_

Type of Payee:

Consultant    Contractor    Medical Services    Legal    Other: \_\_\_\_\_

|                                                                           |        |       |
|---------------------------------------------------------------------------|--------|-------|
| <b>Purchase Order Information</b> <i>(if different from above):</i> _____ |        |       |
| _____                                                                     | Phone# | Fax # |
| (PO Box or Street, City, State, Zip Code)                                 | _____  | _____ |
| E-Mail Address                                                            | _____  |       |
| <b>Contact: Name and Title:</b> _____                                     |        |       |

|                                                                               |         |       |
|-------------------------------------------------------------------------------|---------|-------|
| <b>Bid/Quote/Proposal Information</b> <i>(if different from above):</i> _____ |         |       |
| _____                                                                         | Phone # | Fax # |
| (PO Box or Street, City, State, Zip Code)                                     | _____   | _____ |
| E-Mail Address                                                                | _____   |       |
| <b>Contact: Name and Title:</b> _____                                         |         |       |

|                                                                     |        |       |
|---------------------------------------------------------------------|--------|-------|
| <b>Remit To Information</b> <i>(if different from above):</i> _____ |        |       |
| _____                                                               | Phone# | Fax # |
| (PO Box or Street, City, State, Zip Code)                           | _____  | _____ |
| E-Mail Address                                                      | _____  |       |
| <b>Contact: Name and Title:</b> _____                               |        |       |

Catawba County is required to pay North Carolina state and local sales tax. Please state whether you are set up to charge these taxes on your invoices.  Yes  No

**Invoice Payment Terms:** Catawba County payment terms are **Net 30 Days** from the date of receipt of invoice, unless any available discounts are indicated on the invoice.

**MINORITY and WOMEN BUSINESS ENTERPRISE (MWBE)  
VENDOR/SUPPLIER INFORMATION**

To qualify for MWBE vendor status, 51% of the company must be owned and controlled by a minority or a woman (single or group).

Owner: \_\_\_\_\_ President: \_\_\_\_\_

Indicate if you are certified as an MWBE Vendor by:  State of North Carolina OR  Other

Please check the following that apply:  African American  Hispanic  American Indian  
 Woman  Economically Disadvantaged  Asian

**Commodities:** Please use the space below to describe the commodities you sell or the services you wish to provide to Catawba County, or attach line cards or other information to this form.

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Send to:

Tina Wright, Purchasing Department  
Catawba County Government  
PO Box 389  
Newton, NC 28658-0389  
tinawright@catawbacountync.gov  
Fax: 828-548-2378