



BIDDERS LIST APPLICATION

INSTRUCTIONS: This form must be completed by the General/Prime Contractor, each Sub-Contractor & Joint Venture Partnerships. Please provide copies of all Business Licenses, Articles of Incorporation, etc., and WBE, MBE, Section 3- RBE & DBE Certifications with this form.

_____ Company Name	_____ Address	
_____ City, State & Zip	_____ Telephone	_____ Fax
_____ Primary Contact	_____ Title	
_____ Email Address	_____ Federal Tax Identification Number	
_____ Nevada Business License Number	_____ State of Nevada Contractor's License Number, If any	

NAME AND TITLE OF PRINCIPALS OF YOUR COMPANY

Please list additional principals on a separate sheet of paper.

_____ Name	_____ Title	_____ % Owned
_____ Name	_____ Title	_____ % Owned
_____ Name	_____ Title	_____ % Owned
_____ Name	_____ Title	_____ % Owned

SUPPLIER DIVERSITY STATEMENT: Because the SNRHA receives federal funding, we **must** report to the government our supplier diversity efforts. This information is used for coding and reporting purposes only and will not affect the ability of your firm to do business with our agency. **If you do not complete this area, we cannot add your firm to our eligible list. Resident (RBE) Minority (MBE), Women-Owned (WBE) or Disadvantaged (DBE) Business Enterprise** qualifies by virtue of 51% or more of the ownership and active management by one or more of the following. CHECK ALL THAT APPLY:

<input type="checkbox"/> Male Owned	<input type="checkbox"/> Public Held Corporation	<input type="checkbox"/> Government Agency	<input type="checkbox"/> Non Profit Organization
<input type="checkbox"/> Woman Owned	<input type="checkbox"/> Caucasian American	<input type="checkbox"/> Native American	<input type="checkbox"/> Hispanic American
<input type="checkbox"/> Asian/Pacific	<input type="checkbox"/> Hasidic Jew	<input type="checkbox"/> Asian/Indian	<input type="checkbox"/> SNRHA Resident
<input type="checkbox"/> African American	<input type="checkbox"/> Veteran <input type="checkbox"/> Disabled	<input type="checkbox"/> Other _____	
<input type="checkbox"/> SEC 3/RBE - Enter Certif. # # _____	<input type="checkbox"/> MBE - Enter Certif. # # _____	<input type="checkbox"/> WBE - Enter Certif. # # _____	<input type="checkbox"/> DBE Enter Certif. # # _____

OFFICIAL CERTIFICATION: ___Y or ___N - To claim SEC3/RBE, MBE, WMBE, or DBE preference points during the solicitation process, official documentation is required.

DEBARRED STATEMENT: Has this firm or any principles ever been disbarred from providing any items or services by any local, state or federal governmental agency? ___Y or ___N If yes, please attach a full detailed explanation, including dates, circumstances and current status.

DISCLOSURE STATEMENT: Does/has this firm or any principal have/had any personal or professional relationship with any commissioner or officer of the SNRHA? ___Y or ___N If yes, please attach a full detailed explanation, including dates, circumstances and current status.

The undersigned hereby affirms that he/she is empowered to sign this form and affirms that, to the best of his/her knowledge, the above information is current and accurate.

_____ Signature	_____ Date	_____ Printed Name
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**SERVICES TYPICALLY PURCHASED BY THE SNRHA
(PLEASE CHECK ALL THAT APPLY)**

COMMODITIES:

- | | |
|---------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Air | <input type="checkbox"/> Glass, Window |
| <input type="checkbox"/> Appliances | <input type="checkbox"/> Gardening supplies |
| <input type="checkbox"/> Audiovisual equipment | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Auto Parts | <input type="checkbox"/> Janitorial supplies |
| <input type="checkbox"/> Bottled water | <input type="checkbox"/> Locks/supplies |
| <input type="checkbox"/> Building supplies/Lumber | <input type="checkbox"/> Lubricants |
| <input type="checkbox"/> Carpet/Flooring | <input type="checkbox"/> Motors |
| <input type="checkbox"/> Cellular Telephones | <input type="checkbox"/> Office machines |
| <input type="checkbox"/> Computer/Accessories | <input type="checkbox"/> Paint/supplies |
| <input type="checkbox"/> Doors | <input type="checkbox"/> Paper products/(janitorial) |
| <input type="checkbox"/> Draperies/Hardware | <input type="checkbox"/> Paper produces (office) |
| <input type="checkbox"/> Electrical supplies | <input type="checkbox"/> Plumbing supplies |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Power equipment |
| <input type="checkbox"/> Fastener supplies | <input type="checkbox"/> Printing forms |
| <input type="checkbox"/> Fire Extinguisher | <input type="checkbox"/> Safety equipment |
| <input type="checkbox"/> First Aid Supplies | <input type="checkbox"/> Sprinklers/Parts/PVC/Pipe |
| <input type="checkbox"/> Fuels | <input type="checkbox"/> Tires/Tubes |
| <input type="checkbox"/> Gases, Industrial | <input type="checkbox"/> Tools (Hand-power) |
| <input type="checkbox"/> Glass, (Auto) | <input type="checkbox"/> Vehicles/Trucks |
| <input type="checkbox"/> Water Heaters | <input type="checkbox"/> Other _____ |

SERVICES:

- | | |
|-------------------------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Alarm monitoring | <input type="checkbox"/> Fire Extinguishers |
| <input type="checkbox"/> Answering service | <input type="checkbox"/> Fire Sprinkler Maintenance/Inspection |
| <input type="checkbox"/> Bath Tub Refinish | <input type="checkbox"/> Hi-Rise Water Systems |
| <input type="checkbox"/> Beepers Lease/Maintenance | <input type="checkbox"/> Janitorial |
| <input type="checkbox"/> Carpet Cleaning | <input type="checkbox"/> Newspaper Advertising |
| <input type="checkbox"/> Cellular | <input type="checkbox"/> Pest Control |
| <input type="checkbox"/> Copier Lease/Maintenance | <input type="checkbox"/> Street Sweeping |
| <input type="checkbox"/> Delivery/Pick-up | <input type="checkbox"/> Telephones/Maintenance/Repair |
| <input type="checkbox"/> Drapery Cleaning | <input type="checkbox"/> Towing |
| <input type="checkbox"/> Drug Testing | <input type="checkbox"/> Transmission Repair |
| <input type="checkbox"/> Elevator Maintenance | <input type="checkbox"/> Tree Trimming |
| <input type="checkbox"/> Emergency Generators | <input type="checkbox"/> Typewriter Maintenance |
| <input type="checkbox"/> Fax Lease/Maintenance | <input type="checkbox"/> Pest Control |
| <input type="checkbox"/> Fire Devices Mtce/Inspection | <input type="checkbox"/> Other _____ |

PROFESSIONAL SERVICES:

- | | |
|----------------------------------------|--------------------------------------|
| <input type="checkbox"/> Audit | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Training |
| <input type="checkbox"/> Grant Writing | <input type="checkbox"/> Other _____ |

PROCUREMENT HANDLED BY OUR MODERNIZATION & DEVELOPMENT OFFICE

- | | |
|----------------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Architectural/Engineering | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Construction | |
| <input type="checkbox"/> Geo-Technical | |