

**IMPORTANT: Please forward a copy of your W9 with this form.**

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**VENDOR SURVEY INFORMATION FORM**

Return completed form to the address above or fax to 504 862-8987 or email to [wvancea@tulane.edu](mailto:wvancea@tulane.edu). Please direct questions to Purchasing at 504 865-5211.

As a federal contractor, we are required to report statistics on our vendors/subcontractors in order to comply with applicable government procurement regulations. Your cooperation in providing this information is appreciated. If you require assistance in determining the size and status of your company/organization, please contact the Small Business Administration at 800-U-ASK-SBA or visit their website at [sba.gov](http://sba.gov).

Company Name: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address (include city, state and zip code): \_\_\_\_\_ Web Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

NAICS Code(s): \_\_\_\_\_ DUNS#: \_\_\_\_\_

Capabilities / Services Provided:

Please check each category that is applicable to your business:\*

Vendor type:	Business Size:	Ethnic Origin:	Gender:
Corporation (BU)	Small (S)	Asian Pacific (ASP)	Woman owned (W)
Not for Profit (NP)	Medium (M)	Black (BLK)	
Partnership (P)	Large (L)	Caucasian (CAU)	
Individual (IN)		Hispanic (HSP)	
Foreign Individual (FI)		American Indian / Native American (IND)	
Foreign Corporation (FC)			

I CERTIFY THAT: 1) the business size, and/or 2) the characteristics of the firm's ownership, are accurately reflected as indicated above; 3) all information supplied herein (including all attachments) is correct; 4) that neither the applicant nor any person or concern in any connection with the applicant as principal or officer is debarred or otherwise declared ineligible by any agency of the Federal Government from making offers for furnishing materials, supplies or services to the Government or any agency thereof, and shall notify Tulane University Materials Management immediately if the status, as marked below, changes.

Signature (Company Official): \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
 Title: \_\_\_\_\_ Type or Print Name: \_\_\_\_\_

If certifying as "Small", is firm registered in System for Award Management (SAM). Information available at sam.gov.

Yes

No

If in SAM, is firm certified as a "HUBZone"(H) vendor?

Yes

No

If in SAM, is firm certified as "SDB"?

Yes

No

Certificate #

Expiration Date:

TAX ID# OR EIN:

  

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\* Notice: Under 15 U.S.C. 645(d), CFR 121 any person who misrepresents a firm's status as a small, disadvantaged woman-owned, veteran-owned, Service-Disabled veteran owned, or HUBZone small business concern in order to obtain a contract to be awarded under the preference program established pursuant to section 8(a), 8(d), 9 or 15 or the Small Business Act or any other provision of Federal law that specifically references section 9(d) for a definition of program eligibility, shall – (i) Be punished by imposition of fine, imprisonment or both; ii) Be subject to administrative remedies, including suspension and debarment; and (iii) Be ineligible for participation in programs conducted under the authority of the Act.

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Please note: A fillable version of this form can be found at: [http://matmgmt.tulane.edu/forms/vendor\\_survey\\_information.pdf](http://matmgmt.tulane.edu/forms/vendor_survey_information.pdf)