

# The University of Arizona

# Vendor Information Form

Application Type:         New                     Updated

Vendor Type: *Does your business meet the Federal (S.B.A.) Small Business definition (FAR 19.001) and size standards (FAR 19.102)?*  Yes  No  
If "YES", please "CHECK" one of the following:

- Small Business (SB)     Small Disadvantaged (SD)     Small Business Women-Owned (SW)     AZ Women-Owned (AW)  
 Women-Owned Disadvantaged (WD)     Veteran Owned (VO)     HUB Zone (HZ)     AZ Small (SA)     AZ Disadvantaged (AD)  
 AZ Disadvantaged Women-Owned (AX)     Service-Disabled Veteran-Owned (DV)     Historically Black College/University (BC)  
 Alaska Native Corp     Non-Profit (NP)

Date of HUB ZONE/SDB vendors SBA certification \_\_\_\_\_.

I certify that my Small Business definition is true and correct pursuant to Federal Acquisition (FAR) 52.219-1 and understand the penalties under 15 U.S.C. 645(d) "...any person who misrepresents a firm's status..."

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please Note: *Are you, or any relative, a part-time, fulltime, contract, or student employee of the University of Arizona? Relatives are defined to include spouse, children, grandchildren, parents, grandparents, brothers, sisters (including half-brothers and half-sisters,) brothers and sisters-in-law, and children in-law of the employee.*

No                     Yes

If yes, please complete the Conflict of Interest Form available at [http://uabis.arizona.edu/eforms/forms/iCOI\\_July\\_2010.pdf](http://uabis.arizona.edu/eforms/forms/iCOI_July_2010.pdf).

Contact Edward Nasser, Assistant Director, of Procurement & Contracting Services @ 520-621-5449 with any questions about Conflict of Interest.

Name of Firm:	Phone #: (    )	Fax #: (    )
Legal Name/DBA:	E-mail Address:	
Mailing Address:	City:	State:                    Zip Code:
Previous Address (if updating):	City:	State:                    Zip Code:
Remit to Address:	City:	State:                    Zip Code:
Taxpayer ID Information Federal ID #:	Sales Tax ID Information Arizona ID #:	Duns Number #:

**VENDOR PLEASE NOTE:    W-9 Taxpayer form must be submitted with this form**

**IT IS THE RESPONSIBILITY OF THE VENDOR TO NOTIFY THE PROCUREMENT & CONTRACTING OFFICE OF ANY CHANGES CONTAINED IN THIS APPLICATION. IF THE CHANGES ARE SUBSTANTIAL, YOU MUST REQUEST AND FILL OUT A NEW VENDOR INFORMATION FORM.**

**PLEASE SUBMIT COMPLETED FORM TO:**

**FAX: 520-621-5179 OR MAIL TO ADDRESS LISTED BELOW.**

University of Arizona  
Procurement & Contracting Services  
PO Box 210300  
Tucson, Arizona 85721