



Vendor Information Form

SUBCONTRACTOR/SUPPLIERS

GENERAL INFORMATION

Company Name: _____ Web Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Fax Number: _____

Business Form: Individual Partnership Corporation Other: ____

Contact Person: _____ Position: _____

E-Mail: _____ Cell Phone: _____

Please describe work your company is legally qualified to engage in and customarily performs.

Is your company certified as a (check boxes as applicable):

- Minority Business Enterprise
- Woman Business Enterprise
- Disadvantaged Business Enterprise

Agencies certified with:

Return with signed Fax permission via fax/email to:

Stevens Construction Corp.

Attn.: **Diane Gorski**

Fax #: 608.222.5930

Email: mgorski@stevensconstruction.com

Thank you.



Email/Fax Authorization

SUBCONTRACTOR/SUPPLIERS

_____ authorizes Stevens Construction Corp. to fax and/or email us any and all information pertaining to and relating to business conducted between our two companies. This includes, but is not limited to: quotes, product information, confirmations, orders, invoices, acknowledgements, offerings, etc.

This authorization is in response to the Federal Communications Commission (FCC) published amendments to the Telephone Consumer Act of 1990 (TCPA) which became effective August 25, 2003.

Company Name:	
Fax Number:	
Email Address:	
Signature:	
Please Print Name:	
Title:	
Dated:	

Please complete and fax back to us at
608-222-5930.

If you do not want to receive faxes and do not agree with this authorization, please check this box, write your company name and fax it back to us at the number listed above.

Thank you!