Willows Unified School District CUPCCAA Bidders List Information Form

The main form of communication from the District will be via email

1. Insert below the name and complete address, including zip code, to which a Notice To Contractors or Proposal should be mailed:					
-					
Legal Name of Contractor or Vendor:					
Name of Requestor					
Address:					
City / State / Zip					
2. Insert below the telephone and facsimi as well as email address and web addres	ile numbers at which the Contractor may be reached, s, if applicable.				
Telephone					
Fax:					
Email:					
Web Address					
3. The Class of Contractor's License(s) h provided on the following page.	eld and Contractor License Number(s) are to be				
4. The type(s) of work in which the Contractor is interested and currently licensed to perform are to be indicated on the following page.					
5. Additional Information:					
DIR Number					
Taxpayer Identification Number					
Social Security Number OR					
Employer Identification Number					

Submit form to:

Superintendent

Willows Unified School District, 823 W. Laurel St, Willows, CA 95988
Completed forms may be submitted via email to etaylor@willowsunified.org, for receipt on behalf of the District, or via facsimile to: (530) 934-6609.

All submittals, via email or facsimile, must be clearly labeled "Willows Unified School District CUPCCAA Bidders List Information Form".

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Service and Product Categories

Contract	or: (List all <u>current</u> l	icense classes & descriptions)	Flooring Supplies		
Note: You	u MUST have a current	and active contractor's license to do	Freight (moving and related services)		
business	as a contractor with the	WUSD.	Food Service/Culinary Equipment & Supplies		
Example:			Furniture – classroom, office, copy machines, etc. (specify):		
<u>C20</u>	CA123456	Warm Air Htng, Ventilation & A/C	Glass (Windows/Supplies)		
Class	License Number	<u>Description</u>	Hardware (hand tools, nails, screws, etc.)		
			Heavy Equipment/Machinery (specify)		
			HVAC, Boiler Supplies		
			Industrial Arts-Welding		
			Janitorial/Cleaning (specify)		
			Laboratory Supplies		
			Landscaping & Horticulture Materials/Supplies		
			Lighting (Lamps/Fixtures)		
			Locks/Locksmith Services		
			Lumber		
			Mailroom (Equipment/Supplies)		
			Maintenance Services (specify)		
			Measuring Instruments		
			Medical/Dental/Nursing Equipment & Supplies		
			Musical Instruments/Sheet Music		
Asbest	tos Removal Certification		Office Services (photocopying, printing, graphics)		
☐ Hazard	dous Substance Remova	I Certification	Office Supplies (paper products, etc.)		
Other:	Not Listed Above (spec	fy)	Paint Supplies		
Vendor/S	Supplier:		Photography (Equipment/Supplies)		
Agricu	Itural (specify)		Plumbing – Fixtures and Supplies		
☐ Applia	nces (specify)		Police - Equipment and Supplies		
☐ Art & \	ocational Art (Equipmen	t/Supplies)	Pool (Equipment and Supplies)		
☐ Athletic	c/Gym Equipment		Power Tools		
☐ Audio/	Visual (Equipment/Suppl	ies)	Rentals (Equipment) (specify)		
☐ Autom	otive and Auto Body Sup	plies	Rentals: Other (specify)		
☐ Aviatio	n Equipment and Suppli	es	Roofing (Materials/Supplies)		
☐ Beauty	/ Equipment & Supplies		Safety Equipment & Supplies		
☐ Chemi	cals – Scientific		Sewing Equipment & Supplies		
☐ Childca	are Equipment & Supplie	s	Signs (Traffic/Safety/Directional)		
☐ Comm	unications (radios/pagers	s/telephones)	Theater (Stage, Sets, Lighting, etc.)		
☐ Compu	uter (Hardware/Periphera	ıls)	Trucking (dumping, trash removal, etc. (specify)		
☐ Compu	uter (Software/Supplies)		Uniforms		
☐ Compu	uter - Other (specify)		Utilities Provider (Electric/Gas/Water/Telephone)		
☐ Draftin	g (Equipment/Supplies)		Vehicles (Carts, Bus, Auto, etc.)		
☐ Electric	cal Supplies (specify)		Warehouse (Material Handling Equipment/Supplies)		
☐ Electro	onics (TV, VCR, etc.) (spe	ecify)	Window Coverings (draperies, etc.)		
☐ Fencin	g Supplies		Other: Not Listed Above (specify)		

SELF-CERTIFICATION

Dear Consultant/Contractor/Vendor/Supplier:

The Willows Unified School District seeks Local, Small, Emerging, and Disabled Veteran-Owned Business Enterprises to participate in our major capital improvement projects. Please self-certify your business by checking the appropriate boxes below, in order to identify the criteria under which your business qualifies.

My business qualifies as the following (check all that apply):

Small Business – Please check all that apply:						
 My company's annual gross sales are less than \$1 million. My business is certified with the Small Business Administration (SBA). My business is an Architectural/Engineering firm with annual gross sales of \$4 million or less. My business is a Landscape Architectural firm with annual gross sales of \$5 million or less. My business is a Specialty Trade Contractor with annual gross sales of \$5 million or less. My business is a General Contractor with annual gross sales of \$5 million or less. 						
☐ Emerging Business – defined as one who has business on	nas been in business less than five years. I s	started my				
☐ Veteran-Owned Business – (current certific	cation on file with	(agency).				
☐ Service-Disabled Veteran-Owned Busines	SS					
Local Business – Please check if applicable:						
☐ My business is located within Colusa, Butte, Glenn, or Tehama counties.						
My business also qualifies as (check all that apply). Include Agency where certificate is currently on file:						
☐ Minority Business Enterprise						
☐ Woman-Owned Business Enterprise						
☐ HUB-Zone Business Enterprise						
☐ Disadvantaged Business Enterprise						
Other Business – defined as one that does	not meet any of the other definitions above.					
Name/Title	Signature					
Company						
Street Address, City, State ZIP						
Phone Number	Fax Number					
If you would like to receive notifications of business opportunities via email, please provide email address.						