

# Vendor Application University of Florida

**Note:** This application is valid for one year from last payment or application date, whichever is later.  
A W-9 must be attached to process this application.

\_\_\_\_\_  
Name of Business or Payee

\_\_\_\_\_  
Date of Application

## Part 1 - Contact Information

Main Address			
City			
State		Zip	

Remit Address			
City			
State		Zip	

Business Phone Number

--

Business Fax Number

--

Business Website

--

Contact Person  
Contact Phone Number  
(if different from business number)


Contact Email

--

## Part 2 - Small and/or Minority Status Information - Check all that apply

FEDERAL CLASSIFICATIONS	STATE OF FLORIDA CERTIFIED MINORITY BUSINESS ENTERPRISES (CMBE)	NON-CERTIFIED MINORITY BUSINESS ENTERPRISES (NMBE)	NON-PROFIT ORGANIZATION
<input type="checkbox"/> SBA 8(a) Certification	<input type="checkbox"/> African American	<input type="checkbox"/> African American	<input type="checkbox"/> Minority Board of Directors
<input type="checkbox"/> Small Disadvantaged Business Certification	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Minority Employees
<input type="checkbox"/> HUBZone Certification	<input type="checkbox"/> Asian/Hawaiian	<input type="checkbox"/> Asian/Hawaiian	<input type="checkbox"/> Minority Community Served
<input type="checkbox"/> Veteran	<input type="checkbox"/> Native American	<input type="checkbox"/> Native American	<input type="checkbox"/> Other Non-Profit
<input type="checkbox"/> Service Disabled Veteran	<input type="checkbox"/> American Woman	<input type="checkbox"/> American Woman	
<input type="checkbox"/> Vietnam Veteran	Check all that apply		
<input type="checkbox"/> Women Owned			
<input type="checkbox"/> Minority-Owned Business			

**A.** If you select a classification that is certified by a Federal or State agency, please supply your certification numbers and expiration dates for each certification and the agencies along with this application.

**B.** To determine your Federal Size Standard, please access the U.S. Small Business Administration's website: <http://www.sba.gov/starting/indexwhatis.html> or go the SBA's <http://www.sba.gov/size/> to look up your North American Industry Classification System (NAICS) Code and the qualifying number of employee's or annual dollar amount.

If you are using Federal Size Standards, please specify the codes used:

NAICS CODE: \_\_\_\_\_ Number of Employees: \_\_\_\_\_ OR Annual Amount: \$ \_\_\_\_\_

### Part 3 – Purchase Order and Payment Preferences

By which delivery method do you prefer to receive purchase orders?

- Fax
- Email
- Postal mail

Payment Discount Terms:

- 2% Net 10
- Other: \_\_\_\_\_

By which delivery method do you prefer to receive payment?

- Check
- EFT (To receive payment by Electronic Funds Transfer, please complete the attached form and submit to the address)

### Part 4 – Additional Payment Information and Signature

I certify that the information supplied herein is correct to the best of my knowledge. I further certify that in doing business with the University of Florida my firm is in compliance with Chapter 112, Florida Statutes relating to conflict of interest (to review the Statute in full, visit <http://www.flsenate.gov/Statutes/>).

---

Title of Person Completing/Authorizing Application

---

Name of Person Completing/Authorizing Application

---

Signature of Person Completing/Authorizing Application

You may fill these forms out on-line, print them, and send them by mail, fax or email to Vendor Maintenance:

- | Mail: University of Florida, Attn: Vendor Maintenance, PO Box 115350, Gainesville, FL, 32611-5350
- | Fax: 352-392-0081
- | Email: [addvendor@ufl.edu](mailto:addvendor@ufl.edu)

If you need assistance with these forms you can contact us via email at [addvendor@ufl.edu](mailto:addvendor@ufl.edu).