

**Purchasing Department**  
317 E Lee Room 100  
Sapulpa, OK 74066  
918-227-4909 phone 918-227-6301 fax  
jthomas@creekcountyonline.com



## Vendor Registration

**Company Name:**

**Order From Address** (This is the name and address that will appear on purchase orders and checks)

Division (if applicable): \_\_\_\_\_

Street: \_\_\_\_\_ PO Box: \_\_\_\_\_

City, State, Zip+4: \_\_\_\_\_

Contact Person/Title: \_\_\_\_\_

Prompt Payment Discount Terms\*: \_\_\_\_\_

Telephone: (    ) \_\_\_\_\_ FAX: (    ) \_\_\_\_\_

E-Mail: \_\_\_\_\_ Website: \_\_\_\_\_

**Address for Legal Service of Process:** (if different than Order From Address and where checks will be sent)

Division (if applicable): \_\_\_\_\_

Street: \_\_\_\_\_

City, State, Zip+4: \_\_\_\_\_

Contact Person \_\_\_\_\_

Contact's Title: \_\_\_\_\_

Telephone: (    ) \_\_\_\_\_ FAX: (    ) \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Type of Business**

**Products:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Services:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Is your company:**    **Insured**    Yes/No    **Licensed**    Yes/No    **Bonded**    Yes/No

**License Number:** \_\_\_\_\_

**Tax Information – Required** (a vendor’s registration will not be considered without the following information.)

Tax Reporting Name (Name shown on your income tax return): \_\_\_\_\_

**Taxpayer ID Number:**

Federal Tax ID #: \_\_\_\_\_ or Social Security #: \_\_\_\_\_

Note: The Federal Tax ID # or Social Security # provided must be the correct number for the Tax Reporting Name.

**Mailing Address for Tax Forms or Correspondence:**

Division (if applicable): \_\_\_\_\_

Street/PO Box: \_\_\_\_\_

City, State, ZIP+4: \_\_\_\_\_

**Organization Type (Check One):**

- |   |   |
|---|---|
| <input type="radio"/> Corporation (includes S-Corp) | <input type="radio"/> Government Agency         |
| <input type="radio"/> Individual/Sole Proprietor    | <input type="radio"/> Limited Liability Company |
| <input type="radio"/> Partnership                   | <input type="radio"/> Other _____               |

**Size and/or Diversity Classification per Code of Federal Regulations:**

\_\_\_\_\_  
\_\_\_\_\_

Other:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service that I am subject to backup withholding, or (c) the IRS has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. citizen or person. For federal tax purposes, you are considered a U.S. person if you are 1) an individual who is a U.S. citizen or U.S. resident alien, 2) A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, 3) An estate (other than a foreign estate), or 4) A domestic trust (as defined in Regulations section 301.7701-7).

Authorized Printed Name: \_\_\_\_\_

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

\*\*By completing this form, you are registered with the Creek County Purchasing Department. Registration does not guarantee or replace a contract or contract documents.