



Vendor Information Form

CITY OF PHILADELPHIA - Procurement Department
1401 JFK Blvd. Room 170B - Philadelphia, PA 19102-1685
www.phila.gov/procurement (215) 686-4720 or 4755

By submitting this form, you verify that all information submitted to the City of Philadelphia is true and correct and you are notified that submission of false information by you is subject to the penalties of 18 Pa.C.S Section 4904 relating to unsworn falsification to authorities.

PLEASE COMPLETE THE INFORMATION REQUESTED ON THIS FORM
EMAIL THIS FORM AND YOUR W-9 TO PHLContracts@phila.gov

Name of Business: _____

Federal Tax ID #: _____

Are you registered with the City of Philadelphia's Office of Economic Opportunity (OEO)? Yes No

Select OEO Certification Type: MBE WBE MWBE DSBE

Certification #: _____

Are you registered on PHLContracts? Yes No

Are you registered as a small business with System for Award Management (SAM)? Yes No

MAILING ADDRESS: (FOR BIDS & PURCHASE ORDERS) PHYSICAL ADDRESS ONLY, NO P.O. BOXES

Address Line 1: _____

Address Line 2: _____

City/State/Zipcode: _____

Contact Name: _____

Phone Number: _____

Fax Number: _____

Email Address: _____

Web Address: _____

PAYMENT ADDRESS: (IF DIFFERENT FROM ABOVE)

Address Line 1: _____

Address Line 2: _____

City/State/Zipcode: _____

Contact Name: _____

Phone Number: _____

Fax Number: _____



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CORPORATE HEADQUARTERS (IF DIFFERENT FROM ABOVE)

Address Line 1: _____

Address Line 2: _____

City/State/Zipcode: _____

Contact Name: _____

Phone Number: _____

Fax Number: _____

FORM COMPLETED BY: _____ **PHONE NUMBER:** _____

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