

Richland County Recreation Commission

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Columbia, SC 29229
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VENDOR REGISTRATION FORM

INTERNAL USE ONLY	VENDOR ID	DATE

TRADE CATEGORY

Define the type of contractor work your company performs. If you are a vendor, please describe what you supply.

COMPANY NAME

CONTACT

NAME	TITLE
ADDRESS	
PHONE	EMAIL
FAX	WEBSITE

SCOPE OF WORK

Please provide additional details regarding the offerings of your organization.

ORGANIZATION

NUMBER OF YEARS IN BUSINESS		
CLASSIFICATION / CERTIFICATION		
ORGANIZATION TYPE		
PREFERENCES (VETERAN, WOMEN OR MINORITY OWNED)		
TAXPAYER ID NUMBER	FEDERAL TAX ID NUMBER	
Please list the cities and/or states that your company performs work in.		

CERTIFICATION

I hereby affirm that all information supplied is true and accurate to the best of my knowledge and belief, and I understand that this information will be considered material in the evaluation of quotations, bids, and proposals. Notice must be given of any change in status impacting the information provided within ten (10) days of said change.

NAME	TITLE
SIGNATURE	DATE