## Florence County Vendor Application Procurement Department Phone: (843) 665-3018

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	NEW APPLICATION		FEDERAL ID. #, SOCIAL SECURITY #, C							USINESS LICEN:	SE #	DATE	
	NAME/ADDRESS CHANG	E											
	1. APPLICANTS NAME AND MAILING ADDRESS						2. MAILING ADDRESS FOR PAYMENTS					ITS (IF DIFFERENT FROM 1)	
EMAIL:							EMAIL:						
3. 1	YPE OF ORGANIZATION (	PE OF ORGANIZATION (CHECK ONE)						A. STA	ATE I	NCORPORATED	FAX NUMBER		
	INDIVIDUAL		MINORITY OWNED CORPOR			ΓΙΟΝ							
<u> </u>	PARTNERSHIP		N OWNED										
<u> </u>	NON-PROFIT ORG.	SMALL	BUSINESS										
	4. HOW LONG IN PRESENT BUSINESS												
5. PERSONS AUTHORIZED TO SIGN BIDS, OFFERS, AND CONTRACTS (INDICATE IF AGENT)													
	NAM			OFFICIAL CAPACITY				TELE	PHONE NUMBER (INC. AREA CODE)				
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$\vdash$			/PROFESSIONAL	$\vdash$	CONSTRUC			CTOR		SERVICE CONTR.	ACTOR		
8. DESCRIPTION OF PRIMARY PRODUCT OR SERVICE													
								BUILDINGS CONSTRUCTION OR ASSOCIATED SERVICES					
								BUILDINGS MAINTENANCE OR ASSOCIATED SERVICES					
<u> </u>								JANITORIAL OR ASSOCIATED SERVICES					
⊢								OFFICE SUPPLIES INFORMATION TECHNOLOGY OR ASSOCIATED SERVICE					
$\vdash$								LANDSCAPING OR ASSOCIATED SERVICES					
	OTHER (DESCRIBE)	<u> </u>											
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