



19351 W. Washington Street, E186
Grayslake, IL 60030
(847) 543-2084
Email: CLCSupplier@clcillinois.edu

TO: College of Lake County (CLC) Vendor
FROM: Victoria Lane
Assistant Director, Procurement Services
RE: New Vendor Application Process

The Vendor Maintenance Form is required to be completed by vendor. Incomplete applications will not be processed. Please allow up to 5 business days for processing.

Please submit the required vendor information listed below so that your firm can qualify to be entered into the CLC vendor database. These forms must be completed before you can do business with the College. Please submit your entire vendor packet to the email address CLCSupplier@clcillinois.edu or via U.S. postal Service.

REQUIRED DOCUMENTS TO INCLUDE:

CLC Vendor Application Form – Please complete, sign and return via email

Completed IRS W-9 Form – Sign and return completed form.

CP 575 IRS Letter

OPTIONAL DOCUMENTS TO INCLUDE (if applicable):

Disadvantaged Business Enterprise (DBE) certification letter

If you should have any questions, please contact Procurement Services at (847) 543-2084.

Internal Use Only:

New Vendor Number: _____

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CLC VENDOR'S APPLICATION FORM

1. VENDOR INFORMATION

Name: _____ FEIN, TIN or SS#: _____

Years in Business: _____ Dun & Bradstreet # (if applicable): _____

Parent Vendor Name (if applicable): _____

Is this a One Time Vendor: Yes No

2A. VENDOR GENERAL CONTACT INFORMATION:

Address: _____ Telephone: _____

City: _____ State: _____ Zip Code: _____

Email Address for Purchase Orders and Bids: _____

3. PAYMENT MAILING ADDRESS (IF DIFFERENT FROM 2A)

Address: _____

City: _____ State: _____ Zip Code: _____

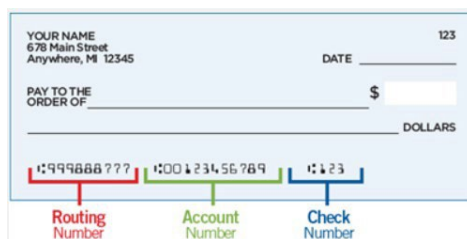
3A. PAYMENT ACH INFORMATION

Please enter your direct deposit/ACH information below. A check payment will be made if ACH information is not provided

Bank Name: _____

ABA Routing Number: _____ Account Number: _____

Remit Email Address: _____



4. (DBE) DISADVANTAGED BUSINESS ENTERPRISE PROGRAM

Letter of certification must be attached

- Certified Minority Business Enterprise (MBE)
- Certified Women's Business Enterprise (WBE)
- Certified Business Enterprise Owned by People with Disabilities (BEPD)

Please check the appropriate category:

- African American
- American Indian
- Asian
- Hispanic
- Other

I hereby certify that neither the vendor nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in a contract or agreement with any federal, state, county or local department or agency. If the vendor is unable to certify to this statement, it must attach an explanation to this application.

I hereby certify that the information supplied herein is correct.

Name and Title (Please Print or Type)	Signature	Date

College of Lake County Contact Name: _____

INTERNAL USE ONLY

IMPORTANT NOTES:

- Departments are responsible for sending new vendors the New Vendor Application.
- Vendors are required to send the following documents to clcsupplier@clcillinois.edu.

The Vendor Application,
W-9,
CP 575 IRS Letter (if Business Entity)

PROCUREMENT SERVICES ONLY

Entered By: _____ **Reviewed By:** _____ **Approved By:** _____