



City of Chattanooga Supplier Information Form

Business Name: _____

PO Address: _____

Remittance Address: _____

If your business Tax Filing Status is Individual/Sole Proprietor or a Partnership and you provide a service to the City of Chattanooga, you will be issued a 1099 Form for the preceding Tax year. Please indicate which address you wish your document sent to if applicable:

1099 Address: _____

Contact Name: _____

Primary Phone Number: _____

Primary Fax Number: _____

Primary Email: _____

Are you Providing: (Check All That Apply)

- | | | | |
|---------|--------------------------|--------------|--------------------------|
| Service | <input type="checkbox"/> | Construction | <input type="checkbox"/> |
| Goods | <input type="checkbox"/> | | |
| Both | <input type="checkbox"/> | | |

Vendor Type (Must be Marked-Check All That Apply)

- | | |
|--|--------------------------|
| MBE-Minority Business Enterprise | <input type="checkbox"/> |
| WBE-Woman Business Enterprise | <input type="checkbox"/> |
| SDVBE-Service Disabled Vet Business Enterprise | <input type="checkbox"/> |
| LGBTE-LGBT Business Enterprise | <input type="checkbox"/> |
| None of the Above | <input type="checkbox"/> |

Preferred Payment Method

- | | |
|-------|--------------------------|
| Check | <input type="checkbox"/> |
| ACH | <input type="checkbox"/> |

ACH-Please provide remittance notice email and complete Separate City ACH Authorization Form:

Authorized Representative Signature

Print Name

Date

All Suppliers are required to include IRS Form W9