



1218.1.3f VENDOR MASTER FILE RECORD DATA FORM (HUB Form)

IRS INFORMATION: Complete IRS form W-9 and return with this form. <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

CONTACT INFORMATION:

REMIT TO:	ORDER FROM:	SAME AS REMIT TO
Vendor Name:	Vendor Name:	
Contact Name:	Contact Name:	
Address 1:	Address 1:	
Address 2:	Address 2:	
City: State: Zip:	City: State: Zip:	
Phone:	Phone:	
E-Mail:	E-Mail:	
Website:	Website:	

NC HUB Certified: Yes No (attach documentation) for more information, visit: www.doa.nc.gov/hub

Black Female Asian American Hispanic
Disabled Disadvantaged American Indian

Federal Certifications: Certified with SBA/VA or self-certified with Federal Government Yes No
(attach documentation), for more information, visit <https://certify.sba.gov/am-i-eligible>

- | | |
|---|---|
| SDB (small disadvantaged business) | WBE (women business enterprise) |
| SBE (small business enterprise) | HBCU/MI (historically black colleges and universities or minority institutions) |
| HubZone (historically underutilized small business) | MBE (minority business enterprise) |
| VOSB (Veteran-owned small business) | Alaska Native Corporations and Indian Tribes |
| DVOSB (service-disabled Veteran-owned small business) | Other SBA 8(a) certifications and programs: (specify) |
| WOSB (women-owned small business) | |

SIZE OF BUSINESS: Small Large
To determine if business is small or large, visit SBA site:
<https://www.sba.gov/document/support--table-size-standards>

I CERTIFY THAT (1) I AM DULY AUTHORIZED TO COMPLETE THIS FORM; (2) THE LEGAL ORGANIZATION SHOWN ON THIS FORM IS CORRECT, AND (3) I am not on the Federal Debarred Vendor list <https://www.sam.gov/portal/SAM/#1#1> or the NC Debarred Vendor list <https://ncadmin.nc.gov/government-agencies/procurement/contracts/debarred-vendors>

SIGNATURE TITLE DATE

PRINT NAME