

### **HACFM VENDOR REQUEST FORM**

4224 Renaissance Preserve Way Fort Myers, FL. 33916

one/Email (print of type						
mitted by: (print or type)	First & Last Nan	ne	Title		Date	
t is the responsibility of the a	applicant(s) to notif	y our office when	any informaition	submitted o	on this form chan	iges.
By registering as a vendor with will become available to the P will be notified on procurement work/contract is guaranteed.	rocurement Officia	l as a sourcing m	echanism only. Th	ere is no gua	rantee implied t	hat your comp
dentify from the attached lis pply to your business and no			work your compa	ny performs	. Please only sele	ct those codes
Notes / Comments:						
Race/Ethnic Codes:		Trade Types:  If other, list here		Program	ı Codes:	
Minority Business Type: Yes	No		Section 3: Yes	No		
Send 1099: Pa	ayment Terms Net: _					
			Name as it ap	pears on Soc	cial Security Card	
Taxpayer Identification Num MUST MATCH W-9 FORM	ber (TIN):		Social Securit	y Number		
		OR				
Cell Phone (provide for Fir	nance)		E-mail Addre	ess (provid	e for Procurem	ent)
Contact Person (provide f	or Finance)		Phone Numl	ber (provide	e for Procureme	 ent)
City State Zi	ip		City Sta	te	Zip	
		goods and so	Address of office that is providing goods and services to HACFM - Procurement		ement	
Address (provide for Fina	nce)	_	Address of o	office that is	providing	<del></del>

Signature



# Commodity Codes for Supplies & Equipment

Air Condition/Heating Equipment, etc.
Appliance Parts
Appliances - Ranges, Refrigerators, etc.
Audio Visual
Automobiles/Trucks/Vans
Awards/plaques
Bar Codes
Batteries
Blueprints
Cameras
Carpet, Tile, etc.
Cell Phones/Air Time
Clothing
Clothing Safety
Computer ERP System
Computer Hardware - Main Frame
Computer Hardware - Micro, parts, etc.
Computer Software
Concrete Materials and Tools
Copiers / Multi-Function Printers
Doors & Parts
Electrical
Elevators/parts
Fasteners/Bolts/Screws
Fencing/parts
Fuel Bulk
Fuel/Lubricants
Garage Doors & Parts
Glass/Windows/Screens
Janitorial
Kitchen Cabinets/Parts
Lighting
Medical
Microsoft software
Modems
Mowers/edgers/weed eaters
Office/Supplies/Furniture
Paint/Accessories
Plants/Trees/Nursery
Playground/Park
Plumbing
Roofing Materials
Sand/Gravel/Soil
Shades/Blinds
Signage

## **Commodity Codes for Service**

Accounting/Auditing
Advertising
Air Conditioning/Heating Installation
Air Conditioning/Heating Repair
Alarm Systems
Appraisals
Architect - Commercial
Architect - Landscape
Architect - Residential
Architect - Urban Design
Asbestos/Mold Removal/Disposal
Asbestos/Mold Testing
Auction Services
Automotive/Truck Repair
Awnings/Installation/Repair
Bar Coding
Blind Installation
Carpet/Tile Installation
Carpet/Tile/Blind Cleaning
Concrete/Repair/Replacement
Copier Maintenance& Repair
Decorative Fencing/Installation/Repair
Demolition
Developers/Property/Real Estate
Duct Cleaning
Education/Training
Electricians
Elevator Repairs/Service
Engineering - Civil
Engineering - Electrical
Engineering - Hydraulic
Engineering - Mechanical
Engineering - Structural
Equipment Repair/mowers/blowers/weed eaters
Fence/Installation/Repair
Fire Alarm
Fire Extinguisher/inspection/repair
General Contractor
Glass/Window Glazing/Repair/etc.
Hazardous Materials Disposal
Insurance/Medical/Dental/Vision
Interior Design
Interpreter
Inventory Control (Page 1)
Irrigation System Service/Repair



# **Commodity Codes for Supplies** & Equipment

Tools	
Traffic/Safety	
Washer/Dryers	
Water Heaters & Parts	

#### **Commodity Codes for Service**

IT Solutions/Support
Janitorial/Custodial
Lawn & Landscape
Lawn Equipment Repair
Lease Equipment
Legal/Attorney
Masonry
Metal Fabrication
Moving/Packing
Painting
Parking Lot Installation/Repair/Striping
Pest Control
Photography
Planning Designing
Planning Services/Master
Plumber
Rental Equipment
Roof Replacement/Repair
Security Systems & Service
Surveying/Property
Telecommunication
Telephone Installation/Repair
Temporary Employment Agency
Tool Repair
Towing
Tree/Trimming/Removal
Welding
Window Cleaning

Please submit a current W-9 form and fill out the ACH form below prior to clicking submit Form



# Vendor Authorization Agreement for Automatic Payment (ACH) (All information to be typed or clearly printed)

First time request for ACH Payments

Request to Change ACH Payment Information

The following Bank	Information applies	to:		
Vendor Name:				
Address:				
City:		State:	Zip:	
		uthorize the Housing Aubed below: (No Savings	nthority of the City of For Accounts)	rt Myers to initiate
Bank Name:				
Address:				
City:		State:	Zip:	
Routing/ABA#				
Bank Account #				
-		by authorize the follow d to the above account)	ing individual to receive	notifications via emai
Name				
Email Address				
Title:				
Phone #				
has received written	notification of disco		ne Housing Authority of to manner as to afford the It to act on it.	•
Authorized Signer:				
	Printed or typed			
Authorized Signer:	Signatura	Title	e:	<del></del>
	Signature			