|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **VENDOR INFORMATION FORM**  **Vendor will complete all sections of this Form. Failure to complete may be cause for rejection of Banneker Vendor Status.**  **This form is an annual requirement of all Banneker Vendors** | | | | | | | | | | | | | | |
| OFFICIAL NAME OF BUSINESS: | |  | | | | | | | | | | | | |
| ALT BUSINESS NAME (SUBSIDIARY OR DBA): | |  | | | | | | | | | | | | |
| PHYSICAL ADDRESS: | |  | | | | | | | | | | | | |
| CITY, STATE, ZIP CODE: | |  | | | | | | | | | | | | |
| Cage Code: | | Text Field – 5 digit letters/numbers | | | | | | | | | | | | |
| JCP Certification (more information [here](https://public.logisticsinformationservice.dla.mil/PublicHome/jcp/default.aspx)): Y/N # | |  | | | | | | | | | | | | |
| Current Banneker Supplier? Y/N | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| PAYMENT REMIT-TO ADDRESS: | |  | | | | | | | | TAX ID OR EIN NUMBER: | | | | |
| CITY, STATE, ZIP CODE: | |  | | | | | | | | PAYMENT TERMS: | | | | |
| TELEPHONE NUMBER: | |  | | | | | | | | DUNS: | | | | |
| ***PLEASE SELECT:*** | | \_\_\_CORPORATION \_\_\_(C) or \_\_\_(S) PARTNERSHIP | | | | | | | | \_\_\_LLC \_\_\_INDIVIDUAL/ SOLE PROPRIETORSHIP | | | | |
|
| ***COMPANY CONTACT INFORMATION*** | | | | | | | | | | | | | | |
| **SALES** | | | **CUSTOMER SERVICE** | | | **QUALITY** | | | | | | **FINANCE** | | |
| NAME: | | | NAME: | | | NAME: | | | | | | NAME: | | |
| TITLE: | | | TITLE: | | | TITLE: | | | | | | TITLE: | | |
| PHONE/ FAX: | | | PHONE/ FAX: | | | PHONE/ FAX: | | | | | | PHONE/ FAX: | | |
| EMAIL: | | | EMAIL: | | | EMAIL: | | | | | | EMAIL: | | |
| ***BUSINESS CLASSIFICATION (SELECT ALL THAT APPLY)***  (For additional information, contact your local U.S. Small Business Administration (SBA) district office or www.sba.gov ). | | | | | | | | | | | | | | |
| Foreign Business Concern | | |  | Large Business (LB) Concern | | |  | | | | Small Business (SB) Concern | | |  |
| SBA Certified Small Disadvantaged Business Concern (SDB) | | |  | Self Certified SDB Concern | | |  | | | | Woman Owned Small Business Concern (WOSB) | | |  |
| Economically Disadvantaged WOSB | | |  | SBA Certified Hub Zone SB Concern | | |  | | | | Historically Black College/University | | |  |
| Minority Institution | | |  | Veteran Owned SB (VOSB) | | |  | | | | Service Disabled VOSB | | |  |
| Native American | | |  | Alaskan Native Corporation | | |  | | | | Ability One | | |  |
| Other (List): | | |  | | | | | | | | | | | |
| ***BUSINESS TYPE (SELECT ALL THAT APPLY)*** | | | | | | | | | | | | | | |
| Manufacturer | | |  | Distributor | | |  | | | | OEM | | |  |
| Other (Specify): | | |  | | | | | | | | | | | |
| ***PRODUCTS/SERVICES (SELECT ALL THAT APPLY)*** | | | | | | | | | | | | | | |
| **PEMCO / Electronics** | | | | | | | | | | | | | | |
| Connectors | | |  | Terminal Blocks | | |  | | | | Circuit Boards | | |  |
| Integrated Circuits | | |  | Transformers | | |  | | | | Resistors | | |  |
| Sensors | | |  | Capacitors | | |  | | | | Diodes | | |  |
| Standard Assemblies | | |  | Custom Assemblies | | |  | | | | Transistors / IGBT | | |  |
| Cable & Wire Harnesses | | |  | Switchgear | | |  | | | | Power Supply | | |  |
| Switches | | |  | Vacuum Tubes | | |  | | | |  | | |  |
|  | | |  |  | | |  | | | |  | | |  |
|  | | |  |  | | |  | | | |  | | |  |
| **Raw Stock (Metals)** | | | | | | | | | | | | | | |
| Aluminum - Sheet, bar, rod | | |  | Aluminum - Extrusions | | |  | | | | Aluminum – angles/other shapes | | |  |
| Aluminum - Aircraft | | |  | Threaded Brass Rods | | |  | | | | Nickel | | |  |
| Stainless Steel – sheet, bar, rod | | |  | Carbon Steel – Hot Rolled | | |  | | | | Carbon Steel – Cold Rolled | | |  |
| Copper Tubing | | |  | Copper Banding | | |  | | | | Copper Coil | | |  |
| Copper Sheets | | |  |  | | |  | | | |  | | |  |
| **Fasteners & Hardware** | | | | | | | | | | | | | | |
| MILSPEC Fasteners | | |  | Gaskets | | |  | | | | Clamps | | |  |
| Rivets | | |  | Pins | | |  | | | | Commercial Fasteners | | |  |
| **Other** | | | | | | | | | | | | | | |
| Transportation (list states of operation) | | |  | Aviation Manufactured Components | | |  | | | |  | | |  |
| Other (specify): | | |  | | | | | | | | | | | |
| ***QUALITY CERTIFICATIONS (SELECT ALL THAT APPLY)*** | | | | | | | | | | | | | | |
| ISO9001 | | |  | ISO14001 | | |  | | | | AS9100 | | |  |
| Additional Certifications (Specify): | | |  | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| ***QUALITY SYSTEM*** | | | | | | | | | | | | | | |
| *Please select and provide explanation if necessary:* | | | | | | | |  | | | | |  | |
| 1. Does your company have a documented quality system implemented? | | | | | | | | \_\_\_ YES \_\_\_ NO \_\_\_ N/A | | | | | | |
| 2. Do you have a documented inspection procedure? | | | | | | | | \_\_\_ YES \_\_\_ NO \_\_\_ N/A | | | | | | |
| 3. Is there a calibration **measurement** system in place? | | | | | | | | \_\_\_ YES \_\_\_ NO \_\_\_ N/A | | | | | | |
| 4. Is there a calibration **management** system in place? | | | | | | | | \_\_\_ YES \_\_\_ NO \_\_\_ N/A | | | | | | |
| 5. Do you agree to use approved sources of supply from our Approved Vendor List if required? | | | | | | | | \_\_\_ YES \_\_\_ NO \_\_\_ N/A | | | | | | |
| 6. Does your organization have a Corrective Action Process? | | | | | | | | \_\_\_ YES \_\_\_ NO \_\_\_ N/A | | | | | | |
| 7. Will you allow on site audits upon request? | | | | | | | | \_\_\_ YES \_\_\_ NO \_\_\_ N/A | | | | | | |
| Comments: | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| ***ADHERANCE TO BANNEKER TERMS AND CONDITIONS*** | | | | | | | | | | | | | | |
| By selecting the following, Vendor has confirmed review of all Banneker Terms and Conditions, and will comply. Terms and Conditions are downloadable here: XX. Further, Vendor understands this does not obligate Banneker in any way… Terms and Conditions are subject to change. Additional requirements may be added at the RFQ level…. | | | | | | | | | | | | | | |
| Radial with Yes, No | | |  | | | | | | | | | | | |
| **I hereby certify the information provided on this form is complete and accurate on the date hereof.** | | | | | | | | | | | | | | |
|  |  | | | |  | | | |  | | | | | |
|  | | | | | | | | | | | | | | |
| SIGNED BY CERTIFYING OFFICIAL Title Date | | | | | | | | | | | | | | |