

# CITY OF JACKSON, MICHIGAN VENDOR REGISTRATION FORM

RETURN THIS COMPLETED FORM TO:

CITY OF JACKSON PURCHASING DEPARTMENT  
161 W. MICHIGAN AVENUE  
JACKSON, MICHIGAN 49201

TELEPHONE (517) 788-4020

SALLARD@CITYOFJACKSON.ORG

FACSIMILE (517) 788-4630

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PLEASE TYPE OR PRINT CLEARLY

COMPANY NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

REMIT TO ADDRESS (IF DIFFERENT THAN ABOVE):

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

FACSIMILE NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

STATUS OF COMPANY: (SEE DEFINITIONS BELOW, MUST SUPPLY COPY OF CERTIFICATE)

NON-MINORITY OWNED BUSINESS

MINORITY OWNED BUSINESS                      TYPE \_\_\_\_\_

WOMEN OWNED BUSINESS                      PERCENT OWNED \_\_\_\_\_

MINORITY OWNED BUSINESS (MBE):      A BUSINESS ENTERPRISE OWNED AND CONTROLLED AT LEAST 51% BY ONE OR MORE MINORITY PERSONS AND CERTIFIED AS SUCH BY THE STATE OF MICHIGAN.

WOMEN OWNED BUSINESS (WBE):      A BUSINESS ENTERPRISE OWNED AND CONTROLLED AT LEAST 51% BY ONE OR MORE WOMEN AND CERTIFIED AS SUCH BY THE STATE OF MICHIGAN.

