

GREAT NECK PUBLIC SCHOOLS
345 Lakeville Road
Great Neck, New York 11020
Purchasing Fax: 441-4927

W-9 form	_____
Vendor #	_____
Date Ent.	_____

Vendor Request Form

Date _____

Vendor Name _____

Mailing Address _____

Address Change _____

Remit Address _____

Telephone # _____ Fax # _____

Tax I.D. # _____ Vendor Proof of Business (catalog/card) _____

Type of Business _____

How many years in business _____ Bid Participation (NYS/BOCES) _____

References _____

Reason for request _____

Requester Signature _____ Date _____

Building _____

(PLEASE SEND/FAX REQUEST FORM TO PURCHASING AS SOON AS POSSIBLE)