

**Colusa Unified School District
CUPCCAA Bidders List Information Form**

The main form of communication from the District will be via email

1. Insert below the name and complete address, including zip code, to which a Notice To Contractors or Proposal should be mailed:	
Legal Name of Contractor or Vendor:	<input type="text"/>
Name of Requestor	<input type="text"/>
Address:	<input type="text"/>
City / State / Zip	<input type="text"/>
2. Insert below the telephone and facsimile numbers at which the Contractor may be reached, as well as email address and web address, if applicable.	
Telephone	<input type="text"/>
Fax:	<input type="text"/>
Email:	<input type="text"/>
Web Address	<input type="text"/>
3. The Class of Contractor's License(s) held and Contractor License Number(s) are to be provided on the following page.	
4. The type(s) of work in which the Contractor is interested <u>and currently licensed</u> to perform are to be indicated on the following page.	
5. Additional Information:	
DIR Number	<input type="text"/>
Taxpayer Identification Number	<input type="text"/>
Social Security Number OR	<input type="text"/>
Employer Identification Number	<input type="text"/>

Submit form to the Director of Maintenance and Operations, Colusa USD, 745 10th Street, Colusa, CA, 95932. Completed forms may be submitted via email to Ashley Jennings, ajennings@colusa.k12.ca.us, for receipt on behalf of the District, or via facsimile to: (530) 458-4030.

All submittals, via email or facsimile, must be clearly labeled "**Colusa Unified School District CUPCCAA Bidders List Information Form**".

END OF PAGE

SELF-CERTIFICATION

Dear Consultant/Contractor/Vendor/Supplier:

The Colusa Unified School District seeks Local, Small, Emerging, and Disabled Veteran-Owned Business Enterprises to participate in our major capital improvement projects. Please self-certify your business by checking the appropriate boxes below, in order to identify the criteria under which your business qualifies.

My business qualifies as the following (check all that apply):

Small Business – Please check all that apply:

- My company's annual gross sales are less than \$1 million.
- My business is certified with the Small Business Administration (SBA).
- My business is an Architectural/Engineering firm with annual gross sales of \$4 million or less.
- My business is a Landscape Architectural firm with annual gross sales of \$5 million or less.
- My business is a Specialty Trade Contractor with annual gross sales of \$5 million or less.
- My business is a General Contractor with annual gross sales of \$5 million or less.

Emerging Business – defined as one who has been in business less than five years. I started my business on _____.

Veteran-Owned Business – (current certification on file with _____ (agency)).

Service-Disabled Veteran-Owned Business _____

Local Business – Please check if applicable:

My business is located within Colusa, Butte, Glenn, Lake, Sutter, Yolo or Yuba counties.

My business also qualifies as (check all that apply). Include Agency where certificate is currently on file:

Minority Business Enterprise _____

Woman-Owned Business Enterprise _____

HUB-Zone Business Enterprise _____

Disadvantaged Business Enterprise _____

Other Business – defined as one that does not meet any of the other definitions above.

Name/Title

Signature

Company

Street Address, City, State ZIP

Phone Number

Fax Number

If you would like to receive notifications of business opportunities via email, please provide email address.
