



City of Hawthorne, Finance Department Vendor Registration Form

Mail Completed Form to:
City Of Hawthorne
Finance Department
4455 W. 126th St.
Hawthorne, CA 90250
Telephone: 310-349-2920

PLEASE DO NOT FAX

(TYPE OR PRINT ALL INFORMATION)

New Registration Form Name and/or Address Change Update or Add Items
If your company was registered with the City of Hawthorne under a different name or address, please fill in the "Previous" information, otherwise leave blank.

Previous Name	Previous Address

Company Name	Address
	Street _____ City _____ State _____

Business Main Telephone Number	Toll Free Telephone Number	Fax Number
City's Account Number With Your Company		Website

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership
Sole Proprietorship Owner's Name: _____		
Employer ID No. or Tax ID No.* _____		

*Note: For a "Sole Proprietorship" the "Employer ID No. or Tax ID No." *must* be a Social Security Number

General Contractor Class	General Contractor License Number

Disadvantaged Business Enterprise (DBE)

(665) Is your company currently certified as a Disadvantaged Business Enterprise (DBE) under 49 Code of Federal Regulations (CFR) Part 26? Yes No

State of California Multiple Award Schedule (CMAS)

Have you been awarded a State of California Multiple Award Schedule (CMAS) Contract Yes No
If yes, what is the contract number? _____ What are the term dates? _____

Key Personnel to be Contacted by City Staff			
Sales Rep. Name	Telephone Number	Cell Phone Number	Email Address
Inside Sales Support	Telephone Number	Cell Phone Number	Email Address

Bid Notices Should Be Addressed To The Above Address To The Attention Of:

I agree to be a resource for the City of Hawthorne during an emergency or disaster situation. I will accept an Emergency Purchase Order in a declared emergency or disaster. I understand that I will be reimbursed at a reasonable cost and will not use the situation to increase the price of the goods or services. Yes No

After Hours Contact:

Name: _____

Phone Number (Cell or Home): _____