



() New Application
() Renewal Application

SEAMAN UNIFIED SCHOOL DISTRICT #345 VENDOR REGISTRATION FORM

INSTRUCTIONS: This Vendor Registration Form provides Seaman USD #345 with important information about you as a vendor. Please complete the form as thoroughly as possible and return to: Business Department, Seaman USD #345, 901 NW Lyman Rd, Topeka KS 66608-1900.

USD #345 requires vendors to update their registration information every two years. No renewal notices will be sent to vendors, it is the vendor's responsibility to renew registration in a timely manner.

ALL INFORMATION SHOULD BE TYPED OR LEGIBLY PRINTED

Vendor Name _____

Federal Employee Identification Number (FEIN) _____

Social Security Number _____ 1099: _____

Primary Address: Order Placement

Payment Address: Remittance

Line 1 _____

Line 1 _____

Line 2 _____

Line 2 _____

Line 3 _____

Line 3 _____

City, State, Zip _____

City, State, Zip _____

Alternate Payee Name: _____

(If Name on remittance should be different than Vendor Name)

Contact Person: _____

Local Phone: _____

Toll Free Phone: _____

Local Fax: _____

Toll Free Fax: _____

E-Mail Address: _____

Web Address: _____

Business Classification:

(Check one that best describes your business)

Large Business

Small Business

Handicapped

Minority Owned Business Enterprise (MBE)

Indicate Ethnic Code in box above: 01-Black, 02-Asian/Pacific Islander, 03-Hispanic, 04-Native American, 05-Asian Indian, 06-Other

Women Owned Business Enterprise (WBE)

Check the choice that best describes your firm's location

- 1 Local – Main Office/Headquarters within USD 345
- 2 Local – Office, shop, store, etc., within USD 345
- 3 Regional – Office, shop, store, etc., within Kansas
- 4 Other – Office, shop, store, etc., outside of Kansas

A business is considered minority or women-owned when a minority or woman holds at least 51 percent of the business interest. The eligible minority/woman owner must hold the highest officer position in the firm and possess the power to direct the management and policies of the firm on a full time basis.

Signature: _____

Title: _____

Print Name: _____

Date: _____

PLEASE COMPLETE REVERSE SIDE OF FORM

CATEGORIES OF COMMODITIES AND SERVICES

Place an "X" by the appropriate category(s)

"X"	Code	Description	Example
	01	Administrative, Financial, Management Services	Banking, Human Resources, Insurance (all types)
	02	Agricultural Equipment, Products, and Services	Livestock, Feed, Crops, Farm Machinery
	03	Art, Art Supplies, Crafts, Theatre, Entertainment	Art Equipment, Supplies, Musical Instruments
	04	Automotive Vehicles, Products, Services	Cars, Trucks, Trailers, Parts, Repair Services
	05	Building Equipment, Supplies, and Services	Building Supplies, Glass, Lumber, Paint, Roofing
	06	Clothing, Textiles, Laundry Equipment/Supplies	Uniforms, Laundry Services, Footwear
	07	Communication Equipment and Services	Radio, Telephone, Video, Television, Audio
	08	Computers, Software, Supplies, and Services	Computer Hardware, Software, Supplies
	09	Food, Food Equipment, Related Services	Foods, Fresh, Frozen, Dairy, Kitchen Equipment
	10	Furnishings and Related Services	Household Appliances, Draperies, Blinds
	11	Furniture and Related Services	School, Office, Library, Cafeteria, Laboratory
	12	Hardware, Related Equipment, and Services	Hand/Power Tools, Fasteners, Adhesives, Hose
	13	Highway Road Equipment, and Related Services	Earth Handling / Road Building Equipment
	14	Janitorial/Cleaning Equipment, Supplies, Services	All Cleaning Supplies, Floor Maintenance, Liners
	15	Laboratory Equipment, Supplies, Services	Clinical Laboratory agents, Testing Supplies
	16	Maintenance and Repair of Equipment	All Equipment Repair Services – Autos, Office
	17	Medical Equipment, Health Supplies, Services	Hospital, Surgical, Dental Instruments, Supplies
	18	Professional Services, Consulting Services	Legal, Architectural, Interpreting, Consulting
	19	Office Supplies, Related Items Services	All Office Supplies, Machines, Equipment
	20	Paper, Printing Equipment, Related Services	Paper (Office/Print Shop), Boxes, Paper Products
	21	Personal Products, Equipment, Services	Barber and Beauty Shop, Grooming Supplies
	22	Public Works, Construction Services, Park Equipment	General Contractor, Facility Maintenance Equip.
	23	Rental and Leasing Services	Rental or Leasing of Property and Equipment
	24	Safety and Protection Equipment, Related Services	Fire, Police, Security, Safety, Environmental
	25	School and Library Equipment, Supplies, Services	School Equipment/Supplies, Educational Services
	26	Sporting, Athletic, Other Outdoor Equipment/Services	Sporting Goods/Equipment, Indoor/Outdoor
	27	Testing and Sampling Equipment and Services	Concrete, Pavement, Fuel, Chemical Testing
	28	Trades: Electrical, Plumbing, HVAC, Engineering	HVAC, Electrical, Plumbing Parts, Supplies
	29	Transit Equipment and Related Services	Aircraft, Mass Transit, Train Equipment
	30	Water and Sewer Treatment Equipment, Supplies	Steam and Hot Water Boilers, Water Supply Equip.
	31	Other	Please explain below

If necessary, use this space to provide further explanation of the Commodities or Services provided by your firm.

Please return the completed form to: Business Department
 Seaman USD #345
 901 NW Lyman Rd.
 Topeka, KS 66608-1900

The completed form may also be faxed to 785-575-8620, Attn: Joy Adams, Business Office, or E-mailed to jcadams@usd345.com.