

Vendor Commercial Solicitation Request Form

Vendor Company Information:	
	Date of Form Completion
Company Name:	
Company Address:	
Company Phone: Compan	y Website:
Point of Contact for Orders:	
Point of Contact for Contracts:	
Type of Business:	
List of commodities / products / services:	
Does your company have any cooperative contracts (Omnia, Sourcewell, E&I, NASPO, TIPS,GOVMVMT):	
Cooperative(s):	
Contract Number(s) & Term of Contract:	
UWF department(s) to be solicited and requested person(s): (Look through UWF's Department/Office Directory online)	
IMPORTANT: Approved solicitors must stop by the <u>UWF Visitor's Center</u> for a visitor's pass.	
Procurement & Contr	acts Authorization:
□ Vendor is registered in Banner□ Verified contract(s) listed on cooperative(s)	
☐ Verified information for UWF Go Shopping Page	
□ Notification sent to UWF Visitor's Center to authorize campus access	
Signature: Vendor Management Processor Date	Signature: Director Date