## VENDOR / CONTRACTOR QUESTIONNAIRE

## All information provided shall be considered confidential

SECTION 1: GENERAL INFORMATION (Required for all applicants)
Company Name: $\qquad$
Street: $\qquad$
City: $\qquad$ State: $\qquad$ Zip Code: $\qquad$
Fax: $\qquad$ Website: $\qquad$
Type of Company or Enterprise:
Corporation
Partnership

O
Individual

$\bigcirc$Other (specify) $\qquad$
Date incorporated: $\qquad$ U.S. State Registered: $\qquad$

PRIMARY CONTACT:
Name: $\qquad$ Title: $\qquad$
Email: $\qquad$ Office Phone: $\qquad$ Cell Phone: $\qquad$
SECONDARY CONTACT:
Name: $\qquad$ Title: $\qquad$
Email: $\qquad$ Office Phone: $\qquad$ Cell Phone: $\qquad$
EMERGENCY/OFF HOURS CONTACT:
Name: $\qquad$ Phone: $\qquad$

Is your company a female- or minority-owned business?
Ores No
If yes, you must provide certificate evidencing ownership status along with this completed questionnaire.

Does your company provide:
Materials (tangible goods)

OServices

OMaterials and services

Central Hudson
A FORTIS COMPANY

## VENDOR / CONTRACTOR QUESTIONNAIRE

***Section $\mathbf{2}$ is only for material suppliers. Service-only providers should skip to section 3***

## SECTION 2: MATERIAL SUPPLIER INFORMATION

(Required for vendors of tangible goods)

1. List all types of products/materials that your company sells or distributes:
2. What type of value-added services does your company offer?
a. Vendor stocking


No
d. Free delivery
 Yes

b. Consignment


Yes

c. Training


Yes
 No
e. Monthly summary billing


Yes

f. Job site delivery

3. Any other information you would like to provide about your company?
4. In order to be considered as a supplier, you must read and agree to comply with Central Hudson's terms and conditions.

## VENDOR/CONTRACTOR QUESTIONNAIRE

## SECTION 3: CONTRACTOR INFORMATION (Required for service providers)

1. Provide information for the officer(s) authorized to sign contracts for your company.

| Name | Title | Email address |
| :--- | :--- | :--- |
|  |  |  |
|  |  |  |
|  |  |  |

## 2. Select any of the following services you provide:

| $\square$ Architectural / Engineering / Design | $\square$ Hydrovac |
| :--- | :--- |
| $\square$ Consulting / Training | $\square$ Excavation / URD and Other Trenching |
| $\square$ Software Development / Computing Needs / | $\square$ Repair and Repave Streets |
| Data Processing / Info Services | $\square$ Soil Remediation / MGP |
| $\square$ Accounting / Audit / Financial | $\square$ Hazardous Material Handling |
| $\square$ Electric Line / Substation Construction | $\square$ Non Hazardous Disposal and Control |
| $\square$ Electric Line Clearance | $\square$ Testing \& Sampling |
| $\square$ Electric Inspection | $\square$ Meter Painting \& Meter Repair |
| $\square$ Gas Construction | $\square$ Security Services |
| $\square$ Gas Inspection | $\square$ Temporary Employment Agency |
| $\square$ Flagging | $\square$ Transportation Maintenance |
| $\square$ Janitorial | $\square$ Architectural / Engineering/ Design |
| $\square$ Landscape and Snow Removal | $\square$ Underwater Divers |
| $\square$ General Site Work |  |
| $\square$ Other: |  |

3. List below major equipment presently owned and operated by your company:

## VENDOR / CONTRACTOR QUESTIONNAIRE

4. Has your company ever failed to complete a contract in the past $\mathbf{5}$ years?No
 Yes, explain below
5. Has your company ever been involved in litigation in the past 5 years?No
 Yes, explain below

## SECTION 4: ADDITIONAL INFORMATION AND CERTIFICATION

(Required for all applicants)

1. Person who completed this questionnaire:

Name: $\qquad$
Title: $\qquad$
Phone: $\qquad$ Email: $\qquad$
2. Complete signed $W$-9 form and send to AP@cenhud.com
3. Send this completed form and any other relevant information via email to purchasing@cenhud.com

Email is preferred. Only if you are unable to email, send documentation to:
Central Hudson Gas \& Electric Corp.
ATTN: Purchasing Dept.
284 South Ave., Poughkeepsie, NY 12601

845-486-5835

