

**THE HOUSING AUTHORITY OF THE BIRMINGHAM DISTRICT  
1826 3<sup>rd</sup> Avenue South, Birmingham, Alabama 35233**

**APPLICATION FORM FOR HABD VENDOR LIST**

Date: \_\_\_\_\_

1. Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_

Contact: \_\_\_\_\_  
Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Federal ID No: \_\_\_\_\_ Email: \_\_\_\_\_  
Website Address: \_\_\_\_\_

2. Organization:       Corporation                       Sole Proprietorship  
                                  Partnership  
                                  Other (Specify): \_\_\_\_\_

Ownership Composition. Fifty-one percent (51%) or more of the business is owned or controlled by ;

- White \_\_\_\_\_                       American Indian \_\_\_\_\_  
 Black \_\_\_\_\_                       Spanish-American (Hispanic) \_\_\_\_\_  
 Female \_\_\_\_\_                       Oriental (Asian) \_\_\_\_\_  
 Other (Specify): \_\_\_\_\_

3. Business References:
- |    | Company Name | Contact | Phone No. |
|----|--------------|---------|-----------|
| 1. | _____        | _____   | _____     |
| 2. | _____        | _____   | _____     |
| 3. | _____        | _____   | _____     |

4. Please indicate on the reverse side, the category(s) for which you are interested in submitting bids, quotes or proposals:

- |  |   |
|--|---|
| <input type="checkbox"/> Electrical                    | <input type="checkbox"/> Janitorial           |
| <input type="checkbox"/> Environmental                 | <input type="checkbox"/> Mechanical           |
| <input type="checkbox"/> Flooring                      | <input type="checkbox"/> Paint                |
| <input type="checkbox"/> General**                     | <input type="checkbox"/> Plumbing             |
| <input type="checkbox"/> Grounds Maintenance           | <input type="checkbox"/> Roofing              |
| <input type="checkbox"/> Demolition                    | <input type="checkbox"/> Clearing and Gubbing |
| <input type="checkbox"/> Other (Please Specify): _____ |   |
| ** General Contractors License (GCL) No: _____         |   |

**SERVICES/CONSULTANTS:**

- |  |   |
|--|---|
| <input type="checkbox"/> Advertising                   | <input type="checkbox"/> Landscaping          |
| <input type="checkbox"/> Architectural / Engineering   | <input type="checkbox"/> Legal                |
| <input type="checkbox"/> Auditing                      | <input type="checkbox"/> Printing             |
| <input type="checkbox"/> Consultant**                  | <input type="checkbox"/> Repair**             |
| <input type="checkbox"/> Employment Search             | <input type="checkbox"/> Software Development |
| <input type="checkbox"/> Equipment Leasing             | <input type="checkbox"/> Security             |
| <input type="checkbox"/> Computer Training             | <input type="checkbox"/> Towing (Wrecker)     |
| <input type="checkbox"/> Financial                     | <input type="checkbox"/> Training**           |
| <input type="checkbox"/> Insurance                     | <input type="checkbox"/> Uniform              |
| <input type="checkbox"/> Other (Please Specify): _____ |   |
| ** Please Specify: _____                               |   |

**SUPPLIES / EQUIPMENT:**

- |  |  |
|--|--|
| <input type="checkbox"/> Appliance Parts               | <input type="checkbox"/> Lawn & Garden Equipment |
| <input type="checkbox"/> Appliances                    | <input type="checkbox"/> Lawn Care Supplies      |
| <input type="checkbox"/> Automotive Parts              | <input type="checkbox"/> Office Equipment        |
| <input type="checkbox"/> Building Materials / Hardware | <input type="checkbox"/> Office Furniture        |
| <input type="checkbox"/> Cleaning / Janitorial         | <input type="checkbox"/> Office Supplies         |
| <input type="checkbox"/> Communications Equipment      | <input type="checkbox"/> Paint and/or Sundries   |
| <input type="checkbox"/> Computer Equipment            | <input type="checkbox"/> Pesticides              |
| <input type="checkbox"/> Computer Supplies             | <input type="checkbox"/> Plumbing                |
| <input type="checkbox"/> Copier Equipment              | <input type="checkbox"/> Roofing                 |
| <input type="checkbox"/> Doors / Windows               | <input type="checkbox"/> Safety                  |
| <input type="checkbox"/> Electrical                    | <input type="checkbox"/> Signage                 |
| <input type="checkbox"/> Fencing Materials             | <input type="checkbox"/> Tires                   |
| <input type="checkbox"/> Flooring                      | <input type="checkbox"/> Tools                   |
| <input type="checkbox"/> Glass, Window                 | <input type="checkbox"/> Vehicles, New           |
| <input type="checkbox"/> HVAC                          | <input type="checkbox"/> Window Treatments       |
| <input type="checkbox"/> Other (Please Specify): _____ |  |

5. \*Do you have any certifications business or professional? With what organizations are you a member (i.e. BCIA, SRMBC, etc)?

- |                                |                                |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

\* You do not have to be certified to do business with HABD.

Please return completed form to:

Mr. Carl Edwards, Purchasing Administrator  
The Housing Authority of the Birmingham District  
P. O. Box 55906  
Birmingham, AL 35255-5906  
or, Fax to (205) 521-7704