Sault Ste. Marie Tribe of Chippewa Indians



Vendor / Supplier Application

The Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe Located in the Eastern Upper Peninsula. It is the mission of the Purchasing Department to acquire goods and services for the Sault Ste. Marie Tribe and its entities.

We would like to establish an account with your company. Our terms are net 30 days. COD's and Prepayments are not accepted. Purchase Order Numbers are required on all purchases, which is to be referenced on all Packing Slips and Invoices:

Our Account should be established as follows:

Sault Ste. Marie Tribe of Chippewa Indians Purchasing Department 2186 Shunk Road Sault Ste. Marie, MI 49783 Phone: 906-635-7035 Fax: 906-635-4910

Internal Revenue Service regulations require that The Sault Ste. Marie Tribe of Chippewa Indians file Form 1099 - Miscellaneous Statements for Recipients of Miscellaneous Income, reporting payments for rents, royalties, fees and compensation for services rendered to certain payees totaling \$600 or more during the calendar year. Failure to furnish the required information will result in delayed payments or compensation.

Current IRS regulations mandate that failure to furnish your Taxpayer Identification Number may result in such payments to you, being subject to Federal Income Tax Withholding. Withholding may also apply if the IRS notifies us that you have furnished an incorrect Taxpayer Identification Number.

Your accurate response to the questions located on this form will assist us in the proper preparation of Form 1099 – Miscellaneous.

Please complete ALL of the attached forms and return via U.S. Mail or facsimile to the address and/or number above. Should you have any questions, please contact Purchasing at the number above.

COMPANY INFORMATION

Date of Application:				
Firm/Company Name:				
Contact Person:	Title:			
Street Address:				
City:	State:	Zip Code		
Remit to address (if different from abo	ve):			
City:	State:	Zip Code		
Phone:	Fax:			
Email	WEB:			
Minority Business: Y/N P (If claiming to be an Indian Economic Enter	lease Specify: prise, see page 4)			
Dun & Bradstreet #:	Federal ID #:	State registered in:		
Parent Company (if applicable):				
Firm/Company Name:				
Street Address:				
City:	State:	Zip Code		
Federal ID #:	State registered in	State registered in:		
References:				
(1)Company Name:				
Contact Person:	Title:	Title:		
Street Address:				
City:	State:	Zip Code		
Phone:	Fax:			
Email:	WEB:			

References (continued)

(2)Con	npany Name:							
Contac	ct Person:	Title:						
Street	Address:							
City:		State:	Zip Code					
Phone:	:	Fax:						
Email:	ail:WEB: If additional space is needed please attach.							
	• How many years has your organization been in the business under your present business name?							
2.		ailed to meet the requirements of a cus	tomer?					
	□ Yes □ No If yes, explain:							
3.	Has your firm changed name	s or Employer Identification Numbers	in the past five years?					
	If yes, please provide a full e	xplanation that includes the reason(s) f	for the change.					

Give a detailed description of product (s) and or service (s) your company provides.

If additional space is needed please attach.

Please submit any additional information you may find necessary:

If additional space is needed please attach.

If claiming to be an "Indian Economic Enterprise"

The Sault Ste. Marie Tribe of Chippewa Indians defines an "Indian Economic Enterprise" as any business entity which is a least 51 (fifty-one) percent owned by one or more members of a federally recognized Indian Tribe; and has one or more of the tribe members involved in the daily business management of the economic enterprise; and a majority of the earnings from said economic enterprise benefits said member or members.

A prospective vendor seeking to qualify for native preference shall provide evidence of certification to the extent of Indian ownership and interest. Certification of eligibility for native preference could include: Bureau of Indian Affairs Certification, Sault Ste. Marie Tribe of Chippewa Indians, Michigan Minority Business Development Council, Small Business Administration, and Certification of membership from another Tribe or Michigan Commission on Indian Affairs Certification. Attach all necessary certification.

List names and addresses of the officers and establish whether they are Native (N) or Non-Native NN.

Company Officer Name	Soc. Sec. #	N/NN Provide copy	Address	% of Stock

□ I acknowledge that the information contained herein is true and accurate:

Authorized Signature Date:

Printed Name: Title: