

NAVY ARMY COMMUNITY CREDIT UNION VENDOR APPLICATION FORM

Navy Army Community Credit Union(NACCU) asks for certain information from proposed vendors. The information requested enables the NACCU to perform due diligence with regard to all proposed vendors, to enhance its bidding process with regard to any product or service, and to comply with guidelines provided with the NACCU's state and federal regulatory agencies. Please complete the following items. The consideration and completion of this application does not carry with it any contractual obligation on the part of the NACCU or your firm. This Application is preliminary in nature. The more complete the Application, the greater NACCU will have the opportunity to make a thorough analysis of your company, and the product or service being offered. Thank you.

GENERAL INFORMATION:

Your Complete Business Name: _____
Doing Business As (DBA): _____

Your Business Address (Mailing Address):

Street: _____
City: _____
State: _____
Zip Code: _____

ADDRESS FOR BILL PAYMENT:

Same as Above

Street: _____
City: _____
State: _____
Zip Code: _____

PHYSICAL LOCATION:

Same as Above

Street: _____
City: _____
State: _____
Zip Code: _____

CONTACT PERSON:

Contact Name: _____
Position With Vendor: _____
Contact Phone: _____
Contact Email: _____
Contact Fax Number: _____
Vendor Website: _____

Please Select One:

- Corporation**
- Sole Proprietorship**
- Limited Liability Company**
- Other:** _____

TAXPAYER IDENTIFICATION NUMBER OR SOCIAL SECURITY NUMBER IF YOU ARE AN INDIVIDUAL OR SOLE PROPRIETORSHIP:

GENERAL DESCRIPTION OF YOUR BUSINESS:

NUMBER OF YEARS IN BUSINESS: _____

IS YOUR BUSINESS AFFILIATED WITH A BRANCH OF, OR A SUBSIDIARY OF ANOTHER BUSINESS? **Yes** **No**

If yes, please specify your parent company: _____

ESTIMATED GROSS RECEIPTS DURING THE PRECEDING CALENDAR YEAR:

PLEASE SELECT THE TYPES OF EQUIPMENT, PRODUCTS, SUPPLIES, MATERIAL AND/OR SERVICES UPON WHICH YOU ARE BIDDING WITH NAVY ARMY COMMUNITY CREDIT UNION

- | | |
|---|---|
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Boxes, Storage and Related Services |
| <input type="checkbox"/> HVAC | <input type="checkbox"/> Building, Office Leases |
| <input type="checkbox"/> Architecture, Interior Design and Engineering | <input type="checkbox"/> Computers, Hardware, and Related Products |
| <input type="checkbox"/> Audio Visual | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Books and Publications | <input type="checkbox"/> Consultant Agreements |

- Copiers
- Electrical Supplies
- Engineering
- Stationary and Envelopes
- Facsimile Equipment
- Food (Non-Catered)
- Food Equipment
- Forms and Related Business Supplies
- Furniture
- Industrial Supplies
- IT Services
- Janitorial
- Marketing
- Office Equipment and Supplies
- Printed Materials
- Printers
- Security Systems
- Software, Licensed or Otherwise
- Telecommunications
- Trash Removal
- Clothing or Uniforms
- Utilities, Electric, Water and Natural Gas
- Vehicles, Purchases, Rentals or Repair
- Videos, Duplication, Prerecorded and Production
- Workshops, Conferences, Seminars and Training
- Document Shredding or Storage

- Drafting
- Moving and Storage
- Other (Please Describe in Some Detail Any Areas Checked Above, or Any Other Products or Services That You Are Proposing to Provide to Navy Army Community Credit Union)

PLEASE PROVIDE YOUR CERTIFICATE OF INSURABILITY.

PLEASE PROVIDE ANY INFORMATION WITH REGARD TO THE PRICING OF PRODUCTS OR SERVICES WHICH YOU PROPOSE TO PROVIDE TO NAVY ARMY COMMUNITY CREDIT UNION:

CONFLICT OF INTEREST DUE DILIGENCE

In its solicitation of bids from vendors, Navy Army Community Credit Union must assure itself, as a state chartered and federally insured credit union, that no conflicts of interest exist or may exist between the Credit Union and any potential vendor. Accordingly, please answer the following questions:

Does Any Employee of Your Firm Serve as an Officer or Director of NACCU?

- Yes No

Is Any Immediate Family Member (Spouse or Dependent Child) a NACCU Employee, a Partner, Shareholder or Sole Proprietor of Your Company?

- Yes No

Does Any Member of an NACCU Employee's Immediate Family (Spouse or Dependent Child) Have an Ownership Interest of 10% or More in Your Company?

- Yes No

Does Any NACCU Employee or Director Hold Any Paid Position in Your Company?

- Yes No

If you answered "Yes" to any of the questions posed, kindly identify the pertinent individuals and their relationship to your company:

THIS INFORMATION IS COMPLETED BY:

Name: _____
Position: _____
Phone: _____
Email: _____
Date: _____

Please Submit Completed Form to:
Thelma Trevino
Executive Secretary
PO Box 81349, Corpus Christi, TX 78468-1349 or
2730 Rodd Field Road, Corpus Christi, TX 78414