

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 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.

GENERAL INFORMATION:

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

BUSINESS MAILING ADDRESS:

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

ADDRESS FOR BILL PAYMENT:

Same as Above

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

PHYSICAL ADDRESS:

Same as Above

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

CONTACT PERSON:

Name: _____
Position: _____
Phone: _____ FAX: _____
Email: _____
Website: _____

ORGANIZATION OF YOUR BUSINESS:

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 NACCU

- | | |
|--|--|
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Computers, Hardware, and Related Products |
| <input type="checkbox"/> HVAC | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Architecture, Interior Design and Engineering | <input type="checkbox"/> Consultant Agreements |
| <input type="checkbox"/> Audio Visual | <input type="checkbox"/> Copiers |
| <input type="checkbox"/> Books and Publications | <input type="checkbox"/> Electrical Supplies |
| <input type="checkbox"/> Boxes, Storage and Related Services | <input type="checkbox"/> Engineering |
| <input type="checkbox"/> Building, Office Leases | <input type="checkbox"/> 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 & Natural Gas
- Vehicles, Purchases, Rentals or Repair
- Videos, Duplication, Prerecorded & Production
- Workshops, Conferences, Seminars & Training
- Document Shredding or Storage
- Drafting
- Moving & Storage
- Other (Please describe in some detail any areas checked above, or any other products or services that you are proposing to provide to NACCU)

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 NACCU:

CONFLICT OF INTEREST DUE DILIGENCE:

In its solicitation of bids from vendors, NACCU 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, please identify the individuals and their relationship to your company:

THIS INFORMATION IS COMPLETED BY:

Name: _____
Position: _____
Phone: _____
Email: _____
Date: _____
Referred By: _____

Please Submit Completed Form to:

Desiree Hofstetter-Laughery -

dlaughery@navyarmyccu.com or Vendor Administration Representative at PO Box 81349,
Corpus Christi, TX 78468-1349 or 2730 Rodd Field Road, Corpus Christi, TX 78414; 361-985-
7300 x1234