

**CITY OF CARLSBAD  
BIDDERS MAILING LIST  
APPLICATION FORM**

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Please fill out the information listed below and return both the application and the commodity book to the City of Carlsbad.

1. Name of Applicant:

\_\_\_\_\_

2. Address of applicant to which bidding documents are to be mailed:

\_\_\_\_\_

3. Telephone Number and Extention:

\_\_\_\_\_

4. Fax Number:

\_\_\_\_\_

5. E-Mail Address:

\_\_\_\_\_

6. Tax Identification Number:

\_\_\_\_\_

7. Category (check one which applies to the applicant):

Manufacturer or Producer

Wholesaler

Retailer

Distributor

Contractor

Other \_\_\_\_\_

8. List personnel contacts and titles:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I certify that the information supplied herein (including all pages attached) is correct and that neither the applicant nor any person (or concern) in any connection with the applicant as a principal or officer, so far as is known, is now de-furnishing materials, supplies or services to any agency thereof.

\_\_\_\_\_  
Signature of Person Authorized to Sign This Application

\_\_\_\_\_  
Name and Title of Person Signing (Please Type or Print)

Please return the application form and the commodity book to:

The City of Carlsbad  
P. O. Box 1569  
Carlsbad, NM 88221-1569  
Atten: Procurement Department

If you have any questions, please call (505) 887-1191 ext. 230 or 232 or call 1-800-658-2713.

**CITY OF CARLSBAD**

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Please use the commodity book attached. Go through it carefully and select the appropriate categories for which to be placed on our bidders list. Our system will only allow a maximum of 15 separate class descriptions. (Example: see page one; item one: Class Number and Name would be listed as 001 Access Controls, the Group Number would be listed as 02, and the Item Description would be listed as Hardware & Software).

	CLASS NUMBER AND NAME	GROUP NUMBER	ITEM DESCRIPTION
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

If the commodity booklet does not indicate a category listing for your company, please provide your information below:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Comments:

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