EXHIBIT C - VENDOR APPLICATION



Please complete this form and attach it with your proposal

Date Submitted:	
CONTACT INFORMATION First Name: Last	Name:
Job Title:	
E-mail Address:	
Phone:	
COMPANY INFORMATION Company Name:	
Street Address:	
City:	
State:	
Zip code:	
Company Web Address:	
Number of employees:	
What is your primary business?	
Length of time in business:	



Form Questions

Please answer t			1.
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1	Provide a	brief desc	cription of	vour com	pany histor	v
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2. Describe the services your company offers.

3. Describe any previous services you have provided to the Soboba Band of Luiseno Indians; Include project names and dates.



REFERENCES

Reference #1: Name:
Phone:
E-mail Address:
Reference #2: Name:
Phone:
E-mail Address:
Reference #3: Name:
Phone:
E-mail Address: