



## SUPPLIER INFORMATION FORM

*Company Name:*

*Corporate Webpage:*

*Physical Address:*

*City, State, Zip:*

*Country:*

*Cage Code:*

*DUNS:*

*Contact Person:*

*Certifications:*

*Phone Number:*

*Fax Number:*

### **COMPANY SIZE:\***

Small Business

Service Disabled Veteran Owned Small Business

Small Disadvantaged Business

Large Business (including non-profit)

Certified by SBA as a HUBZone Small Business

Alaskan Native Corporation

Women Owned Small Business

Indian Tribe

Veteran Owned Small Business

Foreign

\*Note: Check all that apply

### **Primary NAICS Code \*** (for part/service being marketed)

You may wish to review the definitions for the above categories in the Federal Acquisition Regulation 19.7 or 52.219-8 ([www.acquisition.gov/far](http://www.acquisition.gov/far)). If you have difficulty ascertaining your size status, please refer to SBA's website at [www.sba.gov/sizestandards](http://www.sba.gov/sizestandards) or contact your local SBA office.

Under 15 U.S.C. 645(d), Whoever misrepresents its size status can be (1) punished by a fine, imprisonment, or both; (2) be subject to administrative remedies; and (3) be ineligible for participation in programs conducted under the authority of the Small Business Act.

Print Name and Title

Date

***Should additional information be required, the Company Small Business Liaison will contact you!  
We recommend a One Page Capability Statement be available upon request.***

***HUBZone Status will be verified in the Central Contractor Registration (CCR) Dynamic Small Business Search Database***