BID LIST APPLICATION Please Print	**LOS ANGELES HARBOR DEPARTMENT** **CONTRACTS & PURCHASING DIVISION**	Date

1 Check application type: □ Initial □ Revision □ Name Change (print old name here) _____

2 **BUSINESS NAME (DBA)** EXACTLY AS APPEARS ON INVOICES: _____

3 **COMPLETE BID MAILING ADDRESS**
(P.O. Box if used)

TELEPHONE
( )
FAX
( )

4 **LOCAL CONTACT** ( )

5 **ORGANIZATION TYPE** □ Sole Proprietorship □ Partnership □ Corporation (If Corporation indicate President - CEO): _____ Calif. Corp. # _____ State of Incorporation: _____

6 **FULL LEGAL NAME**

7 Division or Subsidiary of : _____

8 **PRINCIPAL/CORPORATE STREET ADDRESS** IF DIFFERS FROM 3

TELEPHONE ( )

9 **REMITTANCE ADDRESS**

TELEPHONE ( )

10 **FACTORS OF OWNERSHIP** Check applicable box only if wholly owned and operated by a minority group member or a woman; 50% or more of partners or stockholders are minority group members or women; or publicly owned and minority group members or women stockholders have at least 51% interest and possess control over management capital earnings.

□ WOMEN □ MINORITY □ MINORITY WOMEN

11 **OWNER'S NAME(S)**

12 **LOS ANGELES CITY BUSINESS TAX REGISTRATION CERTIFICATE/EXEMPTION NO.**

_____

For information contact Los Angeles City Clerk's Special Investigations Unit at (213) 485-3952

13 **SMALL & LOCAL BUSINESS** To qualify for a 10% small and local business preference, please contact City of Los Angeles Public Works Contract Administration at 600 S. Spring St. #1300, Los Angeles, CA 90014, or you may obtain forms on-line at www.portofla.org, or at the City of Los Angeles home page www.cityofla.org.

14 **LIST HERE UP TO 6 PRIMARY COMMODITIES AND/OR SERVICES FIRM DESIRES TO BID**

_____ _____
_____ _____
_____ _____

15 **PRODUCT OR SERVICE** i.e. rental, repair, manufacturer, distributor, etc.:

16 I certify under penalty of perjury, that the information furnished is complete and accurate to the best of my knowledge and that I will be responsible for notifying the Harbor Department of changes.

_____ _____ _____
Signature of Owner, Partner or Corporate Officer only | Printed Name | Printed Title

RETURN ORIGINAL FORM (NOT A COPY) TO: LOS ANGELES HARBOR DEPARTMENT CONTRACTS AND PURCHASING OFFICE - BY MAIL OR IN PERSON – 500 PIER "A" STREET, WILMINGTON, CA 90744