

CITY OF DESOTO, TX

Vendor Registration Form for Companies/Individuals

To become a vendor with the City of DeSoto, please fill out this form and submit it to: procurement@desototexas.gov along with the Company's W-9.

Company's Legal Name: _	
DBA Name, if any:	·
Administrator's Address	(company corporate address)
Street Address:	
City, State, Zip Code:	
Note: Only complete the	he Remittance Address section if different from Administrator's Address Section Above
Remittance Address (add	ress checks are mailed, if not using ACH)
Street Address:	
City, State, Zip Code:	
Email Address:	
Contact Person:	Title:
Telephone Number:	Payment Term:
Registration Status o	f Business
Sole Proprietor: P	artnership: Limited Liability Company: Corporation: Cooperative:
HUB Certified Vendor:	YesNo If Yes, Please attach the HUB Certification with this form.
Signature:	Date:

• Attach a signed and dated W-9 Form.