



CITY OF FALLS CHURCH

Office of Purchasing

300 Park Avenue, Suite 300 East
Falls Church, VA 22046
703-248-5007

BIDDER REGISTRATION FORM

Fax Completed form to (703) 248-5444 or email to purchasing@fallschurchva.gov

Thank you for your interest in doing business with the City of Falls Church, Virginia (City). Vendors interested in doing business with the City should submit this form via fax to the number above or email to purchasing@fallschurchva.gov. In addition, vendors should register with eVA, the Commonwealth of Virginia's electronic procurement portal, <http://eva.virginia.gov>. Registration with eVA provides vendors with notice of business opportunities from government organizations all across the Commonwealth. For help or for more information on eVA, visit <http://www.evaregishelp.dgs.state.va.us/contactus.htm> or contact BuySense (eVA support line) at 1-866-289-7367, TTY 711.

Submission of this Bidder Registration Form is no guarantee a Bidder will be solicited for bids and/or quotes. Bidders are urged to regularly check the City's Website, www.fallschurchva.gov/Purchasing, to keep apprised of current opportunities and requirements. The City uses its Purchasing and Procurement Webpage and eVA as channels to provide vendors with access to notices of formal bids and to publish Invitations for Bids (IFB) and Requests for Proposals (RFP).

Business Name: _____

Diversity Status: Minority Owned Small Business Woman Owned Veteran Owned
(as certified by the Virginia Department of Minority Business Enterprise; <http://dmbe.virginia.gov>)

Payment/Discount Terms: 1 percent/20 days 2 percent/20 days Net 30 days Other

Website Address: _____

Email Address for Notification of Formal Solicitations: _____

Type(s) of Products or Services Offered: _____

BIDDER ADDRESS INFORMATION

Contact Person Name/Title: _____

Mailing Address: _____

City, State, Zip: _____

Telephone: _____ **Fax:** _____

Email: _____

PURCHASE ORDER ADDRESS INFORMATION; Same as Bidder Address: Yes No

Contact Person Name/Title: _____

Mailing Address: _____

City, State, Zip: _____

Telephone: _____ **Fax:** _____

Email: _____

REMIT TO ADDRESS INFORMATION; Same as Bidder Address: Yes No

Contact Person Name/Title: _____

Mailing Address: _____

City, State, Zip: _____

Telephone: _____ **Fax:** _____

Email: _____