Please complete and email to Kimberly Williams: kwilliams@inter-coastal.net

|  |
| --- |
| COMPANY INFORMATION |
| **Company Name:**       |
| **Address:**       |
| **City/State:**       | **Zip Code:**       |
| **Phone:**       | **Fax:**       |
| **Website:**       Example: http://www.yoursite.com |
| **Cage Code:**       | **NAICS Code:**       |
| TYPE OF SUPPLIER |
| [ ]  **Cable/Wire**[ ]  **Chemical Films**[ ]  **Hardware**[ ]  **Machine Shop**[ ]  **Raw Material - Metal**[ ]  **Stamping** | [ ]  **Calibration Lab**[ ]  **Contract Manufacturer**[ ]  **Electronic Manufacturer**[ ]  **O-Ring/Gasket**[ ]  **Raw Material - Plastic**[ ]  **Testing Lab** | [ ]  **Casting/Forging**[ ]  **Electronics Distributor-Authorized**[ ]  **Electronics Distributor- Broker**[ ]  **PCB Fabricator**[ ]  **Sheet Metal**[ ]  **Other: Please Specify**       |
| SYSTEM APPROVALS |
| [ ]  **AS9100** | [ ]  **ISO 9001** | [ ]  **MIL-Q-9858** | [ ]  **Other: Please Specify**       |
| TYPE OF COMPANY |
| [ ]  **Large**[ ]  **Small**[ ]  **Small Disadvantaged** | [ ]  **Women Owned**[ ]  **Veteran Owned**[ ]  **Service Disabled Veteran Owned**[ ]  **Hub Zone** | [ ]  **HBCU / MI** [ ]  **Alaska Native Corp**[ ]  **Native American Tribe** |
| CONTACT INFORMATION |
| **Completed by:**  | **Name:**       | **Phone:**       | **Email:**       |
| **Primary Point of Contact:** | **Name:**       | **Phone:**       | **Email:**       |
| **Senior Company Official:** | **Name:**       | **Phone:**       | **Email:**       |
| **Quality Assurance Contact:** | **Name:**       | **Phone:**       | **Email:**       |