Appendix #2 – Bidder/Offeror Information Sheet

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Bidder/Offeror** |
| **Company Name** |  |
| **Street Address** |  |
| **City, State, Zip Code** |  |
| **Contractor Federal Employer Identification Number (FEIN):**  |
| **Contractor eMM ID Number** | As of the Bid/Proposal submission date, are you registered to do business with the state of Maryland? |
| **SBE / MBE Certification** |
| **SBE** | Number: Expiration Date: |
| **MBE** | Number: Expiration Date:Categories to be applied to this solicitation (dual certified firms must choose only one category). |
| **Bidder/Offeror Primary Contact** |
| **Name** |  |
| **Title** |  |
| **Office Telephone Number (with area code)** |
| **Cell Telephone Number (with area code)** |
| **E-mail Address** |  |
| **Authorized Bid/Proposal Signatory** |
| **Name** |  |
| **Title** |  |
| **Office Telephone Number (with area code)**  |
| **Cell Telephone Number (with area code):**  |
| **E-mail Address** |  |