



PROCUREMENT TECHNICAL ASSISTANCE CENTER (PTAC)

Initial Date _____ 1. Follow Up _____ 2. Follow Up _____ 3. Follow Up _____

Contact Information Sheet

Telephone Interviews

Name: _____

Company: _____

Business Address: _____

City _____ State _____ Zip _____ County _____

Tel: _____ Fax: _____

E - Mail Address: _____

Web Address: _____

Gender: Male _____ Female: _____ Number of Employees: _____

Legal Status - Circle one

Sole Proprietorship Partnership Non-Profit Corporation Limited Liability Company

Business Size: Small Disadvantaged Woman Owned

Date Company was started _____

DUN's Number _____ CCR - Registration Y / N If Yes Add CAGE Code _____

Product / Services WORD Description

Attached a separate sheet if necessary.

NAIC Codes SIC Codes FSC Codes PSC Codes

Ethnic group: White African American Hispanic Sub Continent Asian Asian Pacific American

Indian Alaskan Native, Native Hawaiian Pacific Islander Other

Military Status: Veteran Non Veteran Service Disable Veteran