

**MARK C. POLONCARZ
COUNTY EXECUTIVE**

DIVISION OF PURCHASE

**Vallie M. Ferraraccio
DIRECTOR OF PURCHASE**

Dear Vendor:

Enclosed is a Vendor's list application which consists of general information and a listing of major material categories. Please review the material list carefully and indicate which supplies and/or services you would be interested in supplying.

Vendors who fail to return this application will not be installed on the County's bid list.

Any vendor applying for minority status that is not certified by the Erie County Department of Equal Opportunity, must submit a copy of their certification papers to Erie County EEO, 95 Franklin Street 6th Floor, Buffalo, NY 14202. Vendors may request a certification application by calling (716) 858 – 8604. The Purchasing Department will be enforcing initiatives only to fully certified companies.

Electronic payments program: Upon contracting with Erie County, vendors may receive their County payments *through electronic transmission using a secure VISA credit card account* rather than traditional paper check sent via USPS mail. Erie County has partnered with M & T Bank to provide vendors with a fast, reliable and secure electronic payment process which expedites payment remittances. Participation in this electronic payment program is voluntary – vendors are not required to accept County payments electronically; however, enrollment in the program will ensure timely and reliable payments. If a vendor is interested in learning more about the County's safe and secure electronic payments program, please contact the Erie County Comptroller's Office at (716) 858-7277 to obtain detailed enrollment information.

When you receive bids and quotes for the items that you indicate, please respond to all written bids and quotes with a price offer or a "no bid". This will insure that you remain on our bidder's list. If a response is not received after three inquires, your company's name will be removed from the bidder's list.

Please do not hesitate to call if you have any questions.

Sincerely,

**VALLIE M. FERRARACCIO
DIRECTOR OF PURCHASE**


ERIE COUNTY OFFICE BUILDING • 95 FRANKLIN STREET • BUFFALO, NY 14202 • 716/858-6395 • FAX: 716/858-6465

**DIVISION OF PURCHASE
VENDOR'S LIST APPLICATION**

APPLICANT'S NAME AND MAILING ADDRESS

For Bid Requests and Purchase Orders:

For Payments:

NAME: IDEA Center	Danise Levine
ADDRESS: IDEA Center, University at Buffalo	IDEA Center, University at Buffalo
CITY: Buffalo	309 Hayes Hall
STATE: New York ZIP CODE: 14214	Buffalo, NY 14214
COUNTRY: US	
CONTACT PERSON: Danise Levine	
TELEPHONE NUMBER: AREA CODE (716) 829 – 5903	
FAX NUMBER: AREA CODE (716) 829 – 3861	
E-MAIL ADDRESS: drlevine@buffalo.edu	
PRINCIPAL PLACE OF BUSINESS: University at Buffalo	
TYPE OF BUSINESS:	
<input type="checkbox"/> MANUFACTURER <input type="checkbox"/> FACTORY REPRESENTATIVE <input type="checkbox"/> DISTRIBUTOR <input type="checkbox"/> RETAIL <input type="checkbox"/> SERVICE ORGANIZATION <input checked="" type="checkbox"/> OTHER: Research Center	
FEDERAL ID # [EIN] 14 / 1368361	
< OR > THIS IS MANDATORY!	
SOCIAL SECURITY # _ _ _ - _ _ - _ _ _	
YES <input type="checkbox"/> NO <input type="checkbox"/> VENDOR PAYMENTS ARE REPORTABLE TO THE IRS ON FORM 1099-MISC.	
CERTIFIED MINORITY BUSINESS CLASSIFIED AS FOLLOWS:	
<input type="checkbox"/> BLACK <input type="checkbox"/> HISPANIC <input type="checkbox"/> ASIAN AMERICAN <input type="checkbox"/> Native AMERICAN <input type="checkbox"/> Alaska Native <input type="checkbox"/> WOMAN OWNED <input type="checkbox"/> VETERANS <input type="checkbox"/> MINORITY VETERANS <input type="checkbox"/> OTHER: _____	
RECEIVED MINORITY CERTIFICATION FROM: _____	
I HEREBY CERTIFY THAT INFORMATION SUPPLIED HEREIN IS CORRECT.	
Danise Levine	
PRINT OR TYPE NAME	SIGNATURE
	9/7/2021
PRINT OR TYPE NAME	DATE