

Consultant Information Form

Project Name or Roster Category:

Firm:		Number of Employees:	
Address:			
Phone:		Fax:	
Company Web Site:			
City:	State:	Zip Code:	County:
Remit to Address:			
City:	State:	Zip Code:	County:
Phone:		Fax:	
Statewide Vendor Number (SWV) for Remit to Address:		Federal Tax ID Number or Social Security Number:	
Unified Business Identifier Number (UBI):		D/M/WBE Certification Number:	
Year Firm Established:		NAICS Code & Code Name:	
Contact Person:		Email:	

Firm Type:

Sole Proprietor Partnership C – Corp. Limited Partnership Subchapter S Corp. Limited Liability Company

Annual Gross Receipt:

\$0 to \$1 Million \$1 Million to \$5 Million \$5 Million to \$10 Million \$10 Million to \$15 Million Over \$15 Million

Note:

Firm Name: Please *do not* use: dba’s – doing business as; combination names when two firms are working together, unless the combination name is the formation of a legally registered new company such as a joint venture; derivatives of your legal name; acronyms; etc.

Statewide Vendor (SWV) Number: The Statewide Vendor (SWV) Number is **REQUIRED** for vendors to receive payments. If your firm doesn’t already have an SWV number, your firm will be required to acquire a SWV number prior to execution of a contract and/or being approved as a Sub-consultant to an existing contract. Please contact WSDOT TRAINS Help Desk at 360-705-7514 for assistance. **Federal Tax ID Number:** Please ensure that your legal name matches that assigned to your Federal Tax ID number. If you do not have a Federal Tax ID number, please use your social security number.

Unified Business Identifier (UBI) Number: Your firm will be **REQUIRED** to acquire a UBI Number prior to execution of a contract and/or being approved as a Sub-consultant to an existing contract. This is a Washington State Business license and can be acquired by contacting the Washington State Department of Revenue web site at www.dor.wa.gov.