



**PROFESSIONAL  
ASSOCIATION  
SERVICES, INC.**

**Vendors/Contractors: Please provide the following information if you would like to be considered for our bid list and mail to:**

Professional Association Services, Attn: Vendor List,  
42612 Christy St., Fremont, CA 94538

**Full Legal Name of Company including DBAs:**

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**Address:** \_\_\_\_\_

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**Phone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Website:** \_\_\_\_\_

**Number of Years in Business:** \_\_\_\_\_

**Company Principals:** \_\_\_\_\_

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**All Contractors License #s:** \_\_\_\_\_

**Specialty:** (General Construction/Roofing, etc.): \_\_\_\_\_

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**References:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Please provide a certificate of insurance showing all coverages and a filled out copy of the W9 form.