



Office of Purchasing and Supply Services

Facilities Administration Building (FAB)

13300 Old Marlboro Pike, Room 20

Upper Marlboro, MD 20772

Phone: 301-952-6560 Fax: 301-952-6605

iSupplier Request

Supplier Name: _____

Registering for Solicitation purposes only? Yes, Solicitation Number: _____ No

Referring School/Department Information:

Contact Person: _____

Location: _____ Telephone Number: _____

Email Address: _____

1099 Supplier Information:

1099 Supplier Yes No 1099 to be issued: Yes No

Taxpayer/SSN: _____

NOTE: Supplier Name and ID Number must match Internal Revenue Service (IRS) filing.

The following documents are essential to the processing of your application and must be attached to your iSupplier registration.

- **Certificate of Liability Insurance – Coverage Requirements:**

- General Liability Insurance – Each occurrence minimum of \$1,000,000.00 coverage
- Certificate Holder – The Board of Education of Prince George’s County, 13300 Old Marlboro Pike, Room 20, Upper Marlboro, MD 20772

- **References:**

- Provide three (3) references, non-related, that can attest to the services that your company provides, within the last two (2) years. References must include the client’s name, address, telephone number, description of services/commodities and date(s) provided.

- **Certificate/Licensing (if applicable):**

- Current Department of Health License is required for all catering companies.

Board Policy Number 0109 – Conflict of Interest:

If you are employed by the Board of Education of Prince George’s County or affiliated with any entities or have a family member employed by the Board, you are not eligible to register as a supplier. Please affirm by signing below:

“I am not employed nor have I been employed by the Board of Education of Prince George’s County Public Schools nor do I have any family member(s) employed by the Board of Education of Prince George’s County Public Schools within the last 12 months.”

Printed Name

Title

Owner/Supplier Signature

Date

For Procurement Use Only

Supplier No:	
Verified By:	Date:
Approved By:	Date: