



# Association Management

## VENDOR APPLICATION – Information Sheet

### Company Information

Legal Name \_\_\_\_\_ DBA \_\_\_\_\_

Office Phone \_\_\_\_\_ Website \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_ EIN \_\_\_\_\_

Mailing Address if Different

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

**\*\*\*Please attached completed W-9 with this application\*\*\***

**Primary Contact** \_\_\_\_\_ **Title** \_\_\_\_\_

Mobile/Primary Phone \_\_\_\_\_ Office Phone \_\_\_\_\_

### Trade & Licensing Information

Primary Trade \_\_\_\_\_

Description \_\_\_\_\_

List Counties Served \_\_\_\_\_

**\*\*\*Please attach a copy of all trade licenses with this application\*\*\***

### Insurance Information

Insurance Agency \_\_\_\_\_ Agent Name \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

**\*\*\*Please attach a copy of Certificate of Insurance (COI) for each type of Insurance\*\*\***

**Please review to ensure all information above is complete and email the entire vendor package including the Vendor Services Agreement, W-9, Insurance Certificates, and Business license(s) to [CamVendor@watsonrealtycorp.com](mailto:CamVendor@watsonrealtycorp.com). Incomplete packages will not be accepted.**