



VENDOR INFORMATION FORM

Town of Landis Purchasing Office

312 S Main Street

Landis, NC 28088

Phone: 704-857-2411 Fax: 704-855-3350

Email: jmcmillen@townoflandis.com

Business Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____

Email: _____ **Web Address:** _____

Contact Person: _____ **Title:** _____

Type of Organization: Corporation Partnership Proprietorship Individual Other

References: List Three (3) companies to whom you furnish products or services:

(NAME)	(ADDRESS)	(PHONE)
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list the various products or services your company provides:

