



THE CORPORATION OF THE CITY OF SARNIA
Purchasing Department
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VENDOR INFORMATION

If you wish to be added to our Bid List, please take a minute to fill out this survey, and return it to us, whether you are bidding at this time or not.

NOTE: If you are already on our bid list, there is no need to submit another form, unless the information we have on file has changed, i.e. address, telephone, etc..

This survey can be returned to us by mail, by fax, or by E-Mail, as shown at the top of this form.

**** For your information: All Quotations, Proposals and Tenders currently out for Bid are posted on our Web Site. Once the award has been made, the name of the successful bidder and amount of the award will be posted after the award date. ****

Date: _____

Registered Business Name: _____

Registered Business Number (if applicable): _____

Ontario Corporation Number (if applicable): _____

Contact Name: _____

Mailing Address: _____

City/Province: _____ Postal Code: _____

Telephone Number: _____

Fax Number: _____ Cell Number (if applicable): _____

E-Mail Address (if applicable): _____

Web Address (if applicable): _____

Type of product(s) and/or service(s) you provide (please list):

Please provide product information or catalogue, if available.
Thank you for taking the time to complete and submit this survey.

For Office Use Only

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