Submittal Information Form (Sub-consultant)

Project Name or Roster Category: Click here to enter text.

# **Sub-consultant**

Firm Name: Click here to enter text.

Address: Click here to enter text.

Phone: Click here to enter text. Fax: Click here to enter text.

Company Website: Click here to enter text.

Federal Tax ID Number: Click here to enter text.

Unified Business Identifier Number: Click here to enter text.

D/M/WBE Certification Number: Click here to enter text.

Year Firm Established: Click here to enter text.

SIC Code (Name): Click here to enter text.

NAICS Code (Name): Click here to enter text.

Contact Person Regarding This Submittal’s Information: Click here to enter text.

# Firm Type

Sole Proprietor  Partnership  C – Corp.  
 Limited Partnership  Subchapter S Corp.  Limited Liability Company

# Annual Gross Receipt

$0 to $1 Million  $1 Million to $5 Million  $5 Million to $10 Million  
 $10 Million to $15 Million  Over $15 Million

# Firms Areas of Expertise

Click here to enter text.

***Note:*Firm Name:** Please ensure that the firm name listed is the same firm name that is legally assigned to the federal tax ID number. Please **do not** use: DBA’s – Doing Business As; Combination names when two firms are working together; derivatives of your legal name; Acronyms; etc.  
**Unified Business Identifier (UBI) Number:** If your firm does not have a UBI number for Washington State, please put pending in the box. You will be required to acquire a UBI Number if you are awarded the contract.