

Armstrong: Encouraging Equal Opportunity in Contracting

Armstrong provides equal opportunity to all qualified vendors and contractors, and encourages female and minority entrepreneurs to conduct business with all parts of Armstrong's operations.

Accordingly, Armstrong seeks to recruit from a pool of vendors and contractors that is as wide and diverse as possible. To this end, Armstrong strongly encourages qualified vendors and contractors to complete the Contractor and Vendor Application below. Armstrong will use these applications to locate qualified vendors and contractors for the company's projects.

We will retain these applications for up to three years in our database, and will contact you for more information if we have a project involving a product or service that your company is qualified to provide.

Please print and complete this application and fax or mail it to:

**Ken Wunschel
Director of Human Resources
Armstrong Cable services
One Armstrong Place
Butler, Pa 16001**

Fax: (724) 256-8010

ARMSTRONG VENDOR AND CONTRACTOR APPLICATION

Name of your company: _____

Company Address: _____

Contact name and title: _____

Telephone: _____ Fax: _____

Email: _____

Company Website: _____

Type of company (circle one): Sole-Proprietorship / Joint Venture / Corporation / LLC / Partnership / Other (list) _____

State of Organization: _____

Primary business function (check one):

- | | |
|---|--|
| <input type="checkbox"/> Construction | <input type="checkbox"/> Snow removal |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Janitorial |
| <input type="checkbox"/> HVAC | <input type="checkbox"/> Window cleaning |
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Office machine sales or repair |
| <input type="checkbox"/> Flooring sales or installation | <input type="checkbox"/> PC sales or repair |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Office products sales |
| <input type="checkbox"/> Roofing | <input type="checkbox"/> Fire alarm/protection/extinguishers |
| <input type="checkbox"/> Landscaping | <input type="checkbox"/> Pest control |
| <input type="checkbox"/> Irrigation | <input type="checkbox"/> Vending machines |

Please describe your business: _____

Is your company tax exempt? Yes No

Federal Tax ID Number: _____

Can you provide a certificate of liability insurance? Yes No