



Industry Liaison Program Vendor Profile

Business Name _____

Business Web Site _____

Business Street Address _____

Business City, State, Zip Code _____

NAIC Code(s) _____

Please provide your company's Commercial And Government Entity (CAGE) Code assigned through Central Contractor Registration (CCR). If you have not registered, please go to www.ccr.gov to register. **Your company must be registered with CCR before doing business with FEMA.**

DUNS Number _____

Date of Incorporation/Inception (MM/DD/YYYY) _____

Primary Point of Contact (POC) _____

Primary POC Title _____

Email Address _____

Telephone Number _____

Fax Number _____

Alternate POC (if applicable) _____

Alternate POC Title _____

Telephone Number _____

Fax Number _____

Reason for contacting FEMA

- General inquiry
- Contact for the purpose of offering a product or service
- Offering an unsolicited proposal
- Follow-up to a previous phone call/email
- Vendor Day
- Industry Day

Your company may offer many products or services, but which specific product or service are you offering at this time?

Which FEMA directorate or program office would your product or service apply to? List all offices that apply.

Have you previously met with a program office or FEMA representative? If so, please provide the name of the office, the person that you met with, and the date of the meeting.



Industry Liaison Program Vendor Profile

Is your company currently doing business with a federal government entity or FEMA entity? If so, please list the name of the FEMA office/department and/or other federal agency.

No Yes

If your company is a small business, please check off all the categories that apply.

- 8(a) Small Business
 - HBCU/Minority Institution
 - Historically Underutilized Business Zones (HUBZone)
 - Minority
 - Native American
 - Service Disabled Veteran Owned Small Business (SDVOSB)
 - Small Business (SB)
 - Small Disadvantaged Business (SDB)
 - Tribal
 - Veteran Owned Small Business (VOSB)
 - Woman Owned Small Business (WOSB)
-

Is your product or service currently on a GSA schedule? If yes, please provide GSA schedule numbers.

No

Yes _____

Do you accept government purchase cards?

No Yes

How did you find out about us (i.e. website, referral by FEMA representative, etc)?

Any additional comments (200 words or less)