



Rushern L. Baker, III
County Executive

Prince George's County Government Office of Central Services



Minority Business Development Division Vendor Meeting Request Form

Thank you for your interest in Prince George's County. Please complete the following information and you will be contacted within 72 hours to schedule an appointment.

Date: _____

Company Name: _____

Contact Person: _____

Address: _____

Phone Number: _____ **Email:** _____

Number of Years in Business: _____

Brief Description of Company: _____

NAICS Codes: _____

Are you currently certified with Prince George's County: Yes No

If yes, please specify your certification agency: MDOT WMATA MD-DC/MSDC

Please indicate your response to the following items (check one box):

	<u>Last 3-6 Months</u>	<u>Last 12 Months</u>	<u>1 Year Or Longer</u>
Attended MBDD trainings/workshops	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visited the MBDD website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bid on County procurements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Awarded a PGC procurement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subcontracted w/ another vendor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reason for meeting request:

Procurement Assistance Compliance Issue Certification Advocacy

(Office Use Only)
Meeting Date Scheduled For: _____ **By:** _____
Comments: _____