



ps energy group, inc.

SUPPLIER PROFILE FORM

www.psenergy.com

Supplier Name		
*Category		
*01 African American, 02 Hispanic, 03 Native American, 04 Asian American, 05 Woman-owned, 06 Small Business, 07 Other (explain)		
Street Address		
City	State	Zip Code
Contact Name		Contact Title
Contact Phone	Contact Fax	E-mail Address
Legal type of Firm		<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Other
Years in business	State of Incorporation	
Type of product/services		
Federal Tax ID#/SSN		DUNS#
Division/Subsidiary/Affiliate of		
List your Primary Products and Services		
Other Products/Services your company provides		
Geographic Location	<input type="checkbox"/> Local /Regional <input type="checkbox"/> National	
Total # of Employees		
Annual Sales in last three years	<u>Year</u>	<u>Gross Receipts</u>
Does your company have a second tier supplier Diversity Program?	If yes, please define:	
With what agency are you certified?	Certification ID #	

References:

Company	Contact	Phone

Bank	Contact	Phone

After you fill in the Supplier Profile questionnaire, return it with a copy of the current certificate(s) provided by the agencies with which you are certified to:

PS Energy Group Supplier Diversity Program
P.O. Box 29399
Atlanta, GA 30359