



LOS ANGELES DEVELOPMENT FUND

BUSINESS PROFILE VENDOR REGISTRATION FORM

BUSINESS HEADQUARTERS			OFFICE THAT WILL BE PROVIDING SERVICES (IF DIFFERENT FROM HQ)		
ADDRESS			ADDRESS		
CITY	STATE	ZIP	CITY	STATE	ZIP
PHONE	EMAIL	PHONE	EMAIL		
CONTACT PERSON			CONTACT PERSON		
PROFESSIONAL/TECHNICAL SERVICES PROVIDED		SUPPLIER/SERVICE		CONTRACTOR/CONSTRUCTION	
SERVICES SOLD				DEVELOPER	
CONTRACTOR LICENSE #		LA BUSINESS REGISTRATION CERTIFICATE (BTRC#)		FED TAX ID#	

OWNERSHIP OF BUSINESS				PERCENTAGE OF OWNERSHIP / OWNER ETHNICITY							
<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> NON-PROFIT	<input type="checkbox"/> CORPORATION		MALE	FEMALE	Ownership %	NON-MINORITY	BLACK	HISPANIC	ASIAN	AMERICAN INDIAN
<input type="checkbox"/> JOINT VENTURE	<input type="checkbox"/> SOLE PROPIETOR	<input type="checkbox"/> OTHER									
NAMES OF OWNERS											

BUSINESS WORKFORCE UTILIZATION ANALYSIS (FOR OFFICE THAT WILL BE PROVIDING SERVICES)													
	MEN						WOMEN						TOTAL NUMBER OF PERSONS
	NON-MINORITY	BLACK	HISPANIC	ASIAN	AMERICAN INDIAN	TOTAL MEN	NON-MINORITY	BLACK	HISPANIC	ASIAN	AMERICAN INDIAN	TOTAL WOMEN	
Official/Managers													
Professional													
Technician													
Para-professional													
Subtotal													
Office/clerical													
Skilled crafts													
Service/maintenance													
Total													

DECLARATION: I certify that the foregoing information is accurate and true and will notify LADF of any changes.
SIGNATURE OF OWNER OR PRINCIPAL TITLE DATE
