

## Texas Health and Human Services Commission Vendor Information Form (VIF)

Instructions: This form must be completed and submitted with **each** new contract, amendment, renewal, and/or extension.  
**(Please type or print information.)**

### SECTION 1: Contractor's General Information

Legal Contractor's Name:	City of Laredo Public Health		
Legal Doing Business As (DBA) Name:	Laredo Public Health Environmental Health Division		
Physical Address:	2600 Cedar Ave. Laredo, Texas 78040		
Remit To (Payment) Address:	Laredo Public Health 2600 Cedar Ave. Laredo, Texas 78040		
Enter one of the following:	<input type="checkbox"/> Texas Identification Number (TIN): <input type="checkbox"/> Federal Employer Identification Number (FEIN): <input type="checkbox"/> Social Security Number (SSN):		
Select the Legal Status:	<input type="checkbox"/> For-profit Entity	<input type="checkbox"/> Non-profit Entity	
Select the Business Structure:	<input type="checkbox"/> Corporation <input type="checkbox"/> Joint Venture <input type="checkbox"/> Partnership* <input type="checkbox"/> Limited (Liability) Company <input type="checkbox"/> Limited (Liability) Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Governmental Entity (must specify): City of Laredo Public Health <input type="checkbox"/> Other (must specify): * If Partnership, must provide SSN or TIN for minimum of two partners		
	Partner Name:		TIN or SSN:
	Partner Name:		TIN or SSN:
	State of Incorporation:		Texas Charter Number:

### SECTION 2: Contractor's Contact Information

Person Who Will Sign the Contract	Point of Contact for Contract
Name:	Name:
Title:	Title:
Mailing Address:	Mailing Address:
Telephone:	Telephone:
Fax:	Fax:
E-mail:	E-mail:

### SECTION 3: Contractor's Authorized Signature (or HHSC Contract Manager)

Printed Name	Signature	Date	Phone Number

### SECTION 4: PCS Contract Administration Office Use Only

Contractor to Receive Payment: <input type="checkbox"/> No <input type="checkbox"/> Yes
Contract Number: