



FLORIDA POWER & LIGHT COMPANY

Vendor Information Form

Please complete the information below and fax or mail completed forms as directed.

Corporate Name _____

| Corporate Headquarter Address - (W-9) | Contact Person | Phone | Fax |
|--|----------------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| Web Address | e-Mail Address | | |

| PO Mailing Address - (Ordering) | Contact Person | Phone | Fax |
|---------------------------------|----------------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| | e-Mail Address | | |

| Payment Address - (Remit To) | Contact Person | Phone | Fax |
|------------------------------|----------------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| | e-Mail Address | | |

W9 Required

W9 On File at FPL

Please check one of the following classifications:

- | | |
|--|--|
| ___ 001 Non-Minority Large Bus-Man | ___ 020 Hispanic Small Bus-Woman* |
| ___ 002 Non-Minority Small Bus-Man | ___ 021 Woman Large Bus* |
| ___ 005 African/Black American Large Bus-Man* | ___ 022 Woman Small Bus* |
| ___ 006 African/Black American Small Bus-Man* | ___ 023 Minority-Other* |
| ___ 007 African/Black American Large Bus-Woman* | ___ 025 Veteran Large Bus-Man* |
| ___ 008 African/Black American Small Bus-Woman* | ___ 026 Veteran Small Bus-Man* |
| ___ 009 Asian American/Pacific Island Large Bus-Man* | ___ 027 Veteran Large Bus-Woman* |
| ___ 010 Asian American/Pacific Island Small Bus-Man* | ___ 028 Veteran Small Bus-Woman* |
| ___ 011 Asian American/Pacific Island Large Bus-Woman* | ___ 029 Service Disab Vet Large Bus-Man* |
| ___ 012 Asian American/Pacific Island Small Bus-Woman* | ___ 030 Service Disab Vet Small Bus-Man* |
| ___ 013 American Indian Large Bus-Man* | ___ 031 Service Disab Vet Large Bus-Woman* |
| ___ 014 American Indian Small Bus –Man* | ___ 032 Service Disab Vet Small Bus-Woman* |
| ___ 015 American Indian Large Bus-Woman* | ___ 033 HUBZONE Large Bus-Man* |
| ___ 016 American Indian Small Bus-Woman* | ___ 034 HUBZONE Small Bus-Man* |
| ___ 017 Hispanic Large Bus-Man* | ___ 035 HUBZONE Large Bus-Woman* |
| ___ 018 Hispanic Small Bus-Man* | ___ 036 HUBZONE Small Bus-Woman* |
| ___ 019 Hispanic Large Bus-Woman* | |

***Certification of your minority status must be furnished with this request**