QUALIFIED SUPPLIER'S LIST APPLICATION									
QSLO CATEGORY (BULK METALS PRODUCTS)	1. TYPE OF APPLICATION (CHECK ALL THAT APPLY)	IN	ITIAL EAPPLICATION	REVISI		2. OATE			
NOTE: COMPLETE ALL ITEMS. INSERT N/A IN ITEMS I	NOT APPLICABLE. SEE REVERSE F	OR APPL	ICABLE DEFINIT	TIONS.					
PUBLIC REPORTING BURDEN FOR THIS COLLECTION (EXISTING DATA SOURCES, GATHERING AND MAINTA BURDEN, TO THE FAR SECRETARIAT (VRS), OFFICE O	INING THE DATA NEEDED, AND CO	OMPLETI	NG AND REVIEW	VING THE COLLECTION O					
3. SUBMIT FORM TO:		4. NA	4. NAME AND ADDRESS OF APPLICANT (INCLUDE COUNTY & ZIP CODE)						
DLA TROOP SUPPORT CONSTRUCTION & EQUIPMENT ATTN: FCSB, QSL OFFICE 700 ROBBINS AVE, BLDG 3/C WS-6455 PHILADELPHIA, PA 19111-5092		CAGEIF APPLICANT QUES NOT HAVE A CAGE SEE CRITERIA							
5. TYPE OF ORGANIZATION (CHECK ONE) INDIVIDUAL NON-PROFIT ORGANIZATION			6. ADDRESS TO WHICH SOLICITATIONS ARE TO BE MAILED (IF DIFFERENT THAN ITEM 4)						
PARTNERSHIP CORPORATIO UNDER THE L STATE OF:	N INCORPORATED AWS OF THE					3			
	7. NAMES O	F OFFIC	ER, OWNERS	OR PARTNERS					
A. PRESIDENT	B. VICE PRESIDENT				C. SECRETARY				
D. TREASURER E. OC MGR (INCL TEL									
8. AFFILIATES OF APPLICANT (NAMES, LOCATION AND NATURE OF AFFILIATION. ATTACH SEPARATE SHEET IF NECESSARY)									
9. PERSONS AUTHORIZED TO SIGN OFFERS AND CONTRACTS IN YOUR NAME (INDICATE IF AGENT)									
NAME	NAME OFFICIAL CAPACITY TELEPHONE NO. AND FAX NO. (Include area code)								
10. SIZE OF BUSINESS (SEE DEFINITIONS DN PAGE 2)	SMALL BUSIN	ESS	{	VERAGE NUMBER OF NCLUDING AFFILIATE: RECEDING CALENDAR	S FDR FDUR				
11. TYPE OF OWNERSHIP (SEE DEFINITIONS OF DISADVANTAGED BUSINESS	ON PAGE 2) WOMEN OWNED BUSINESS	12.		INESS (SEE DEFINITION ANUFACTURER		BUTDR			
13. OUNS NO. (IF AVAILABLE)			14. DATE	BUSINESS STARTED					
15. FLOOR SPACE (SOUARE FEET) A. MANUFACTURING			B. WAREHDUSE						
16. NET WORTH									
CERTIFICATION - I CERTIFY THAT INFORMATION SUPPLIED HEREIN (INCLUDING ALL PAGES ATTACHED) IS CORRECT AND THAT NEITHER THE APPLICANT NOR ANY PERSON (OR CONCERN) IN ANY CONNECTION WITH THE APPLICANT AS A PRINCIPAL OR OFFICER, SO FAR AS IS KNOWN, IS NOW DEBARRED OR OTHERWISE DECLARED INELIGIBLE BY ANY AGENCY OF THE FEDERAL GOVERNMENT FROM MAKING OFFERS FOR FURNISHING MATERIALS, SUPPLIES, OR SERVICES TO THE GOVERNMENT OR ANY AGENCY THEREOF. IT IS UNDERSTOOD THAT ANY DISCREPANCIES OR OMISSIONS IN THIS APPLICATION. WHEN COMPARED TO GOVERNMENT RECORDS MAY BE CAUSE FOR REJECTION OF MY APPLICATION. THE PENALTY FOR MAKING FALSE STATEMENTS IS PRESCRIBED IN 18. USC. 1001. THE APPLICANT FURTHER AGREES, ONCE QUALIFICATION IS ATTAINED, TO CONTINUOUSLY MAINTAIN THEIR QUALITY SYSTEM IN COMPLIANCE WITH QSL CRITERIA.									
17 NAME AND TITLE OF PERSON AUTHORIZED TO SIGN (TYPE	E OR PRINT)		18. SIGN /	TURE		19. DATE SIGNED			
20. E-MAIL ADDRESS:			21. PHONE NUMB	HONE NUMBER:					

DEFINITIONS OF TERMS

SIZE OF BUSINESS DEFINITIONS (SEE ITEM 10)

A. SMALL BUSINESS CONCERN

A SMALL BUSINESS CONCERN FOR THE PURPOSE OF GOVERNMENT PROCUREMENT IS A CONCERN, INCLUDING ITS AFFILIATES, WHICH IS INDEPENDENTLY OWNED AND OPERATED, IS NOT DOMINANT IN THE FIELD OF OPERATIONS IN WHICH IT IS COMPETING FOR GOVERNMENT CONTRACTS, AND CAN FURTHER QUALIFY UNDER THE CRITERIA CONCERNING NUMBER OF EMPLOYEES, AVERAGE ANNUAL RECEIPTS, OR THE OTHER CRITERIA, AS PREPARED BY THE SMALL BUSINESS ADMINISTRATION. (SEE CODE OF FEDERAL REGULATIONS, TITLE 13, PART 121, AS AMENDED, WHICH CONTAINS DETAILED INDUSTRY DEFINITIONS AND RELATED PROCEDURES).

B. AFFILIATES

BUSINESS CONCERNS ARE AFFILIATES OF EACH OTHER WHEN EITHER DIRECTLY OR INDIRECTLY (I) ONE CONCERN CONTROLS OR HAS THE POWER TO CONTROL THE OTHER, OR (II) A THIRD PARTY CONTROLS OR HAS THE POWER TO CONTROL BOTH. IN DETERMINING WHETHER OR NOT AFFILIATION EXISTS, CONSIDERATION IS GIVEN TO ALL APPROPRIATE FACTORS INCLUDING COMMON MANAGEMENT AND CONTRACTUAL RELATIONSHIP (SEE ITEMS 8 AND 10A).

C. NUMBER OF EMPLOYEES

IN CONNECTION WITH THE DETERMINATION OF SMALL BUSINESS STATUS, "NUMBER OF EMPLOYEES" MEANS THE AVERAGE EMPLOYMENT OF ANY CONCERN INCLUDING THE NUMBER OF PERSONS EMPLOYED ON A FULL TIME, PART TIME, TEMPORARY OR OTHER BASIS DURING EACH OF THE PAY PERIODS OF THE PERIOD THAT SUCH CONCERN HAS BEEN IN BUSINESS.

TYPE OF OWNERSHIP DEFINITIONS (SEE ITEM 11)

A. "DISADVANTAGED BUSINESS CONCERN"

MEANS ANY BUSINESS CONCERN (1) WHICH IS AT LEAST 51 PERCENT OWNED BY ONE OR MOHE SOCIALLY AND ECONOMICALLY DISADVANTAGED INDIVIDUALS; OR, IN THE CASE OF ANY PUBLICLY OWNED BUSINESS, AT LEAST 51 PERCENT OF THE STOCK WHICH IS OWNED BY ONE OR MORE SOCIALLY AND ECONOMICALLY DISADVANTAGED INDIVIDUALS; AND (2) WHOSE MANAGEMENT AND DAILY BUSINESS OPERATIONS ARE CONTROLLED BY ONE OR MORE OF SUCH INDIVIDUALS.

B. "WOMEN OWNED BUSINESS"

MEANS A BUSINESS THAT IS AT LEAST 51 PERCENT OWNED BY A WOMAN OR WOMEN WHO ARE U.S. CITIZENS AND WHO ALSO CONTROL AND OPERATE THE BUSINESS.

TYPE OF BUSINESS DEFINITIONS (SEE ITEM 12)

A. MANUFACTURER OR PRODUCER

IS A PERSON (OR CONCERN) OWNING, OPERATING, OR MAINTAINING A STORE, WAREHOUSE OR OTHER ESTABLISHMENT THAT SUBSTANTIALLY PRODUCES, ON THE PREMISES, THE MATERIALS, SUPPLIES, ARTICLES OR EQUIPMENT OF THE GENERAL CHARACTER LISTED IN THE SUPPLIERS COMMODITY INTEREST/ACTIVITY LIST.

B. DISTRIBUTOR

MEANS A PERSON (OR CONCERN) OWNING,
OPERATING, OR MAINTAINING A STORE,
WAREHOUSE OR OTHER ESTABLISHMENT IN WHICH
THE MATERIALS SUPPLIES, ARTICLES OR
EQUIPMENT OF THE GENERAL CHARACTER LISTED IN
THE SUPPLIERS COMMODITY INTEREST/ACTIVITY
LIST ARE BOUGHT, KEPT IN STOCK, AND SOLD TO
THE PUBLIC IN THE USUAL COURSE OF BUSINESS,
THE CAGE CODE LISTED ON THE APPLICATION MUST
BE THE FACILITY WHERE THE QUALITY CONTROL
FUNCTION IS PERFORMED.

SUPPLIERS COMMODITY INTEREST/ACTIVITY LISTING CAGE. COMPANY NAME: ADDRESS COMMODITIES FEDERAL AVAILABILITY * SUPPLY C: ASS (BULK METAL ACTIVITY PRODUCTSI MATERIAL (APPROX) FSC. AVAILABLE BES1 ON (GRADE/TYPE) WITHIN 30 TIMEFRAME PRODUCT SUPPLIED DAYS/ YES NO MONTHS OTHER STAIN-TOOL IRON AND STEEL CARBON ALLOY (SPECIFY) LESS WIRE 9505 (NONELECTRICAL) BARS 9510 RODS **PLATE** 9515 SHEET FOIL STRUCTURAL 9520 SHAPES ALUM-COPPER NICKEL ZINC OTHER INUM AND AND AND NONFERROUS (BASE METAL) (SPECIFY) AND **ALLOYS ALLOYS** ALLOY ALLOYS WIRE 9525 (NONELECTRICAL) BARS 9530 RODS PLATE SHEET 9535 STRIP FOIL STRUCTURAL 9540 SHAPES REMARKS

REFERENCES

To facilitate the Qualification Process, and eliminate unnecessary site-surveys, we request that you provide the following information with regards to prior INDUSTRY surveys/audits conducted at your site within the last 18 months. Please also include data on association certifications, e.g. ISO 9002, NADCAP, etc.

Date Initially Approved as a Supplier for that Company					3			
nitially Applier for the								
Date								
				(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)				
Date & Purpose of most recent Survey/Audit								
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<u>}</u>		* *						
Point of contact at Conducting Company (include telephone with Area Code)								
Conductir								
contact at da telepho								
Point of (include								
9								
Company Conducting Survey/Audit								
Company Surve								
Ref #	-	2	60	4	ro.	9	7	8