KNOX COUNTY SCHOOLS
2007-2008 VENDOR QUESTIONNAIRE

Name of Company_____
Agent(s) Name_____
Address_____
City & State_____Zip_____
Telephone number(s) _____Fax number_____
E-mail address_____Web page address_____
What are your normal business hours?_____
Other names the company has been known by_____
_____
Please name all of the products you will be selling and give us a brief description of each product/service._____
_____
_____
How long has the company been in business?_____
How long has each agent been with the company?_____
Have you ever had a complaint filed against your company with the Better Business Bureau or any other like company? Yes____ No_____
What was the nature of the complaint?_____
How was it resolved?_____
Have you had a letter from the Superintendent granting you permission to go into the Knox County Schools before? Yes____ No_____
What years have you had a letter?_____
What are the agents names that should be on your letter granting permission?_____
_____
In order to process your letter you must provide us with 1) completed questionnaire with all the names listed on it and 2) a signed copy of the rules for each agent listed on the questionnaire.

I confirm that all of the information above is accurate. I understand that knowingly providing false and/or misleading information in this application, to Knox County Employees or to the Employee Benefits Office may subject me or my company to action including but not limited to having my letter of permission revoked.

_____
Signature of Agent Date

_____
Printed Name of Agent Company