



# CONTRACT DOCUMENT ORDER FORM

**SSE # : D81801**

**Solicitation Title: Design Services for Stations on the Flushing Line (SOG and ADA Work)**

## TO REQUEST DOCUMENTS FOR THIS PROCUREMENT

Please complete this form in its entirety and email it to [SolicitationDocs@mtacd.org](mailto:SolicitationDocs@mtacd.org)

**Company Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
(Street Address is Required)

**Contact:** \_\_\_\_\_  
(Please enter the name of the contact for this project)

**Title:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_  
(Addenda Notifications will be sent to this Email Address)

**Fax #:** \_\_\_\_\_ **MTA Bidder/Supplier#:** \_\_\_\_\_  
*(We cannot process your order without a Bidder/Supplier ID #)*

**Unique Entity ID#** \_\_\_\_\_ **Tax ID #/EIN:** \_\_\_\_\_  
(\*NOTE: DUNS # is no longer acceptable. Please use your SAM registration ID #)

**I am interested in this project as a:** ☐ **Prime Contractor** ☐ **Sub-Contractor**

**In order to participate you must be a registered & active vendor with System for Award Management (SAM).**

\*If you do not have an existing Bidder or Supplier ID you will need to register on the My MTA Portal [www.mymta.info/vendor](http://www.mymta.info/vendor)