



WE CREATE GREAT BUILDING
SOLUTIONS EVERY DAY.

Re: Notification of Equal Employment Opportunity/Affirmative Action Obligations

Dear Subcontractor/Vendor/Supplier:

NCI Building Systems and/or one of its affiliates noted in the attached Vendor Request Form, is a Federal government contractor and subject to the requirements of the Office of Federal Contract Compliance Programs (OFCCP). As part of NCI's compliance with Federal Equal Employment Opportunity (EEO) and Affirmative Action (AA) regulations, we are required to inform you of our policy and request your cooperation.

NCI reaffirms its belief and commitment in equal employment opportunity for all employees and applicants for employment in all terms and conditions of employment. Through the implementation of our Affirmative Action Program (AAP), we continue our efforts to comply with appropriate government regulations and to make the best possible use of personnel while contributing to the betterment of society and the community.

We have listed the affirmative action laws we are governed by and their implementing regulations for your easy reference.

- **Executive Order 11246 (and its implementing regulations at 41 C.F.R. part 60);**
For more information, please visit: <https://www.dol.gov/ofccp/regs/statutes/eo11246.htm>
- **The Vietnam Era Veterans Readjustment Assistance Act of 1974, as amended (and its implementing regulations at 41 C.F.R. 60-300);**
For more information, please visit: <https://www.dol.gov/ofccp/regs/statutes/4212.htm>
- **Section 503 of the Rehabilitation Act of 1973, as amended (and its implementing regulations at 41 C.F.R 60-741);**
For more information, please visit: <https://www.dol.gov/ofccp/regs/compliance/section503.htm>

We appreciate your cooperation in our effort to fully comply with these Federal requirements.

Please fill out the attached Vendor Request Form in its entirety, sign it, and return it to us.

Thank you for your prompt attention concerning this matter.

ROBERTSON -CECO II CORPORATION
VENDOR REQUEST FORM

Vendor No: _____

This section must be completed by the Robertson-Ceco II Corporation ("Buyer") original requestor:
 Printed Name & phone of original requestor: _____ Plant /Company Number: _____

THE FOLLOWING IS REQUIRED INFORMATION AND MUST BE COMPLETED BY VENDOR

VENDOR NAME:	
	<i>The vendor name should be the billing name or name as it appears on the invoice.</i>
ADDRESS:	
REMIT TO ADDRESS:	
PHONE NO:	
FAX NO	
EMAIL ADDR:	
NAME:	
TITLE & PHONE#	

1099 REPORTABLE VENDOR: YES or NO
FEDERAL TAX PAYER ID NO. _____ DUN & BRADSTREET NO. _____
Name on Tax Payer ID: _____
Address where your business name is registered: _____
County where your business is registered: _____
Current State license number for Service Providers: _____
Freight Carrier DOT# & MC# _____

GSA VENDORS (Please check the appropriate field(s) below)

Large Business _____

Small Business _____

Woman Owned _____

Small Disadvantaged _____

HUBZone _____

Veteran Owned Small Business _____

Service-Disabled Veteran Owned _____

Provide the following information including the 6-digit code:

NAICS CODE _____ **DESCRIPTION** (<http://www.census.gov/epcd/naics02/naicod02.htm>) _____

PLEASE CIRCLE ONE:	
	PARTNERSHIP INDIVIDUAL
	CORPORATION GOVERNMENT AGENCY
	OTHER: _____

Primary Parts and or Services that you are providing to this Buyer: _____

Related Party Transactions:	Is the Vendor a relative or close friend of an employee, director or officer of NCI or affiliates?
	Is the Vendor a previous employee?
	Yes or No
	If Yes, please provide the name of employee and describe relationship:

VENDOR TYPE:	
<i>Please circle one</i>	Freight Carrier Vendor Service Provider Outside Processing Steel/Coil
	Charitable Organization Dealer/Builder Utility Medical Legal
	Other: _____

Are discounts and/or special payment terms offered?

If Yes, please specify: _____

VENDOR HEREBY AGREES THAT ANY AND ALL PURCHASES MADE BY BUYER ARE SUBJECT TO, AND STRICTLY CONDITIONED UPON, BUYER'S PURCHASE ORDER TERMS AND CONDITIONS OF SALE FOR VENDORS WHICH ARE WHOLLY ADOPTED AND INCORPORATED HEREIN BY REFERENCE. THE FOREGOING TERMS AND CONDITIONS SHALL CONTROL NOTWITHSTANDING ANY ADDITIONAL OR DIFFERING TERMS AND CONDITIONS OF VENDOR, WHICH ARE HEREBY EXPRESSLY REJECTED. (Copies of Buyer's Purchase Order Terms and Conditions of Sale for Vendors are available at http://www.ncibuildingsystems.com/contact_vendorrequests.html)

Return this completed form to the buyer /original requestor.

Vendor Authorized Signature _____ **Date** _____ **Title :** _____

Printed Name of Vendor Authorized Signature _____