

## **ADMINISTRATIVE SERVICES** DEPARTMENT

Jerry Gamez, Director of Administrative Services

PROCUREMENT SERVICES DIVISION 2964 Richardson Drive, Auburn, CA 95603

Fax: (530) 889-4274

## LOCAL VENDOR PREFERENCE QUALIFICATIONS

Pursuant to Placer County Code Section 608(a) and Placer County Purchasing Policy Section 1.2(f), a local preference credit of 5%, but not cumulatively greater than \$5,000.00, shall be granted to Placer County businesses when evaluating bids for supplies, equipment, materials, and personal services that are not part of a public project. In order to qualify for this preference, a vendor must meet all of the following criteria:

- 1. The local business shall have established a place of business within Placer County at least six (6) months prior to publication of the call for bids.
- 2. Where state sales tax will be paid for the purchase, the local business must possess a valid resale license from the State Board of Equalization showing evidence of a local business address within Placer County. The payment of the local share of the sales tax must go to either a city located within Placer County, or to the County of Placer. If the local business has more than one office in the State of California, the office located in Placer County shall be the point of sale credit for the purpose of sales tax calculation.
- 3. The local business, with business and/or real property tax due to the County of Placer, paid such tax to Placer County for the most recent tax year. This provision shall not apply to businesses that were not established at that time or where no taxes were due.

Bidders claiming local vendor preference for any Bid, Price Quote, or RFP must submit an Affidavit of Eligibility (see next page) with their bid or quote response, unless an approved affidavit is already on file. Submit completed affidavits via mail or fax to the following location:

Placer County Procurement 2964 Richardson Drive Auburn, CA 95603-2964

Fax: 530-889-4274

For questions or assistance relating to the County's local vendor preference policy, call us at 530-886-2122.



## **COUNTY OF PLACER**

**DIVISIONS:** 

- □ Administration
- ☐ Central Services
- □ Information Technology ☐ Procurement Services
- Revenue Services
- Telecommunications

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LOCAL VENDOR PREFERENCE AFFIDAVIT OF ELIGIBILITY

		be rejected. Submit by mail or fax to the above address.
1.	LEGAL NAME OF FIRM:  Mailing Address:	Physical Address (if different):
2.	Year your business was established in Placer C	County:
3.	Business License Number issued by County of	of Placer, or incorporated City within the County:
	License Number:	Issued by:
4.	For transactions which require sales tax, provide the following Reseller information:	
	Reseller Permit Number:	
	Enter the Company Name and Address as it appears on permit:	
5.	Does your business have more than one office Yes No If Yes, specify the office location considered	e in the State of California?
6.	Was the local business required to pay business and/or real property tax for the most recent tax year?  Yes No	
	If Yes, did the local business pay any of this tax to Placer County?  Yes No	
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ackı qual	nowledges that any person, firm, corporation or entit	foregoing statements are true and correct. The undersigned also by intentionally submitting false information to the County in an attempt to ding on Placer County products and services for a period of one (1) year, .1(d).
Authorized Signature:		Date:
Printed Name & Title:		Phone: