Florida Department of Agriculture and Consumer Services
Division of Food, Nutrition and Wellness

CHILD NUTRITION PROGRAMS
FOOD SERVICE VENDOR INFORMATION

VENDOR INFORMATION

Company Name: _____

Doing Business As, if applicable: _____

Mailing Address Line 1: _____

Mailing Address Line 2: _____

City, State, Zip Code: _____

County: _____

Meal Prep Site Address Line 1: _____

Meal Prep Site Address Line 2: _____

City, State, Zip Code: _____

County: _____

Website: _____

Contact Person: _____

Email Address: _____

Phone Number: _____

This information will be listed publicly on the FDACS Food Service Vendor List.

CORPORATE PROFILE

Is your company certified as a Minority-Owned, Woman-Owned, or Veteran-Owned Enterprise? If yes, please submit current certification. ☐ Yes ☐ No

Primary Business Function
Please mark the one box that best describes your company.

☐ Caterer ☐ Food Service Management Company

☐ Restaurant ☐ Other: _____

Primary Program(s)
Mark the USDA program that your company has an interest in participating.

☐ National School Lunch Program (NSLP)
☐ Summer Food Service Program (SFSP)
☐ School Breakfast Program (SBP)
☐ Fresh Fruit and Vegetable Program (FFVP)
☐ Afterschool Snack Program (ASSP)

NUTRITION INFORMATION

Specialty Menu
Mark the box next to each specialty menu that your company provides.

☐	**V**	Vegetarian	☐	**H**	Halal
☐	**VG**	Vegan	☐	**L**	Latin
☐	**F**	Gluten-Free	☐	**N**	All Natural
☐	**DF**	Dairy-Free	☐	**R**	Renal
☐	**PF**	Peanut-Free	☐	**K**	Kosher
☐	**PKF**	Pork-Free	☐	**P**	Puree
☐	**CF**	Casein-Free	☐	**ORG**	Organic
☐	**SF**	Salt-Free	☐	**SS**	Shelf-Stable
☐	**ALG**	Special Allergy	☐	**DIAB**	Diabetic
☐	**LS**	Low-Sodium	☐	**Other**	_____

SERVICE AREA(S)

Mark the box next to each Florida county in which your company is able and willing to provide food services.

☐ Alachua	☐ Franklin	☐ Lee	☐ Pinellas
☐ Baker	☐ Gadsden	☐ Leon	☐ Polk
☐ Bay	☐ Gilchrist	☐ Levy	☐ Putnam
☐ Bradford	☐ Glades	☐ Liberty	☐ Santa Rosa
☐ Brevard	☐ Gulf	☐ Madison	☐ Sarasota
☐ Broward	☐ Hamilton	☐ Manatee	☐ Seminole
☐ Calhoun	☐ Hardee	☐ Marion	☐ St. Johns
☐ Charlotte	☐ Hendry	☐ Martin	☐ St. Lucie
☐ Citrus	☐ Hernando	☐ Miami-Dade	☐ Sumter
☐ Clay	☐ Highlands	☐ Monroe	☐ Suwannee
☐ Collier	☐ Hillsborough	☐ Nassau	☐ Taylor
☐ Columbia	☐ Holmes	☐ Okaloosa	☐ Union
☐ DeSoto	☐ Indian River	☐ Okeechobee	☐ Volusia
☐ Dixie	☐ Jackson	☐ Orange	☐ Wakulla
☐ Duval	☐ Jefferson	☐ Osceola	☐ Walton
☐ Escambia	☐ Lafayette	☐ Palm Beach	☐ Washington
☐ Flagler	☐ Lake	☐ Pasco	☐ All Counties

_____ _____

Printed Name of Authorized Company Official | Position

_____ _____

SIGNATURE OF AUTHORIZED OFFICIAL | Date