

**Group 20915 Award 23295 - Furniture, All Types (except Hospital Room and Patient Handling)(Statewide)
ATTACHMENT 12 – CONTRACTOR and RESELLER/DISTRIBUTOR INFORMATION
(for ordering and contract administration purposes)**

Contractor/Company Information	
Company Business Name:	Artcobell Corporation
D/B/A – Doing Business As (if applicable):	Artcobell Corporation
Address:	1302 Industrial Boulevard Temple, TX 76504
Company Website:	www.artcobell.com
Federal Tax ID #:	74-2236641
NYS Vendor ID #:	1000057867
Contact for Contract Administration issues	
Contract Administrator Name:	Cindy Hawkins
Title:	Bid/Contract Manager
Address (if different from above):	1302 Industrial Boulevard Temple, TX 76504
Email:	chawkins@artcobell.com
Phone:	254-899-3610
Toll Free Phone:	877-778-1811
Contact for Contract Sales/Billing (if different from above)	
Contact Name:	Cindy Hawkins
Title:	Bid/Contract Manager
Address:	1302 Industrial Boulevard Temple, TX 76504
Email:	chawkins@artcobell.com
Phone:	254-899-3610
Toll Free Phone:	877-778-1811
Business hours (Specify M-F, Sat, Sun):	M-F 8AM to 5PM
Contact for Emergencies	
Contact Name:	Cindy Hawkins
Title:	Bid/Contract Manager
Address:	1302 Industrial Boulevard Temple, TX 76504
Email:	chawkins@artcobell.com
Phone:	254-899-3610
Cell Phone:	877-778-1811
Invoicing (Entity information that will appear on invoices, for orders placed directly with the Contractor, if different from Contractor/Company information above)	
Invoicing Entity Company Name:	
Federal Tax ID #:	
NYS Vendor ID #:	
Is payment made to the above Entity/Federal ID#? <i>Note: If yes, the invoicing entity NYS Vendor ID MUST be referenced on Purchase Orders</i>	

Enter the information requested below for each Reseller/Distributor that will provide Product to Authorized Users. In Columns B through E, indicate if the location is a NYS certified Minority- or Women-Owned Business Enterprise, Service-Disabled Veteran Owned Business Division, or a Small Business* (self-identified). In Columns H through J, indicate if the Reseller/Distributor is authorized to take orders, deliver Product, and/or receive payment. If a Reseller/Distributor is allowed to accept payment, they MUST have a NYS Vendor ID.
*A "Small Business" means a business which: (a) is resident in New York State; (b) is independently owned and operated; (c) is not dominant in its field; and, (d) employs one hundred or fewer persons

Company Business Name	WBE	MBE	SDVOB	SB	FEIN	NYS Vendor ID	Take Orders	Deliver Product	Receive Payment	Over-the-Counter Hours	Street Address	City	Zip Code	County	Contact Name	Telephone Number	Fax Number	Email Address	Restrictions Applicable to this Contractor Location
HNE Equipment					11-3113455	1000005865	X	X		M-F 8AM to 5PM	1493 Church Street	Holbrook, NY	11741	Suffolk	Steven Myers Vice President	631-563-6500	631-563-6502	steve@hneequipment.com	No restrictions
Nickerson NY LLC					06-0905538	1000005344	X	X		M-F 8AM to 5PM	11 Moffit Boulevard	Bay Shore, NY	11706	Suffolk	Beth Poskus Manager, Loose Furniture	631-666-0200 x244	631-666-2667	bposkus@nickersoncorp.com	No restrictions
A.R. Kropp LLC D/B/A A.R. Kropp Co & Sons			X		11-3557719	1100119502	X	X		M-F 8AM to 5PM	30 Carrington Drive	East Northport, NY	11731	Suffolk	Greg Kropp Partner	631-423-3661		gregkropp@arkshelving.com	No restrictions
Intivity Inc.		X		X	16-1478699	1000008256	X	X		M-F 8AM to 5PM	106 Despatch Drive East	Rochester, NY	14445	Monroe	Fabricio S Morales President	585-325-7696		fmorales@intivity.com	No restrictions

Company Business Name	WBE	MBE	SDVOB	SB	FEIN	NYS Vendor ID	Take Orders	Deliver Product	Receive Payment	Over-the-Counter Hours	Street Address	City	Zip Code	County	Contact Name	Telephone Number	Fax Number	Email Address	Restrictions Applicable to this Contractor Location
BFI Business Furniture Inc	X				22-1453912	1100011925	X	X		M-F 9AM to 5PM	10 Lanidex Plaza W #202	Parsippany, NJ	07054	Morris	Kate Kerpchar President & CEO	908-926-6167		kkerpchar@bifurniture.com	