

**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:	Tristate Apartment Furnishers, LLC
DB/A – Doing Business As (if applicable):	
Address:	431 Timpson Place, Bronx, NY 10455
Company Website:	www.apartmentfurnishers.com
Federal Tax ID #:	13-4018400
NYS Vendor ID #:	1100109431
Contact for Contract Administration Issues	
Contract Administrator Name:	Abraham Kohn
Title:	Member
Address (if different from above):	
Email:	akohn@apartmentfurnishers.com
Phone:	(718)665-3700
Toll Free Phone:	(800)522-7731
Contact for Contract Sales/Billing (if different from above)	
Contact Name:	Esty Marcus
Title:	Account Executive
Address:	431 Timpson Place, Bronx, NY 10455
Email:	esty@apartmentfurnishers.com
Phone:	(718)665-3700
Toll Free Phone:	(800)522-7731
Business hours (Specify M-F, Sat, Sun):	
Contact for Emergencies	
Contact Name:	Abraham Kohn
Title:	Member
Address:	431 Timpson Place, Bronx, NY 10455
Email:	akohn@apartmentfurnishers.com
Phone:	(718)665-3700
Cell Phone:	
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
All Star Furniture Installations, Inc.	X				11-3635675		X	X		6-5 Monday - Friday	865F Acorn Street	Deer Park	11729	Suffolk	Melissa Maricordo	(631)249-3339 Ext 21		mmaricordo@allstarfurniture.com	
Urban DenCITY, LLC		X			46-4441430	1100320304	X	X	X	9 AM- 5:30 PM EST	3019 Hone Avenue	Bronx	10469	Bronx	Gary Steale	(917)545-4205		gary@urbandencity.com	