### VENDOR REFERENCES

### Please list three (3) references of current customers who can verify the quality of service your company provides. The County prefers customers of similar size with scopes of work similar to this bid.

### REFERENCE ONE:

|  |
| --- |
| COMPANY NAME: |
| ADDRESS/CITY/STATE/ZIP: |
| CONTACT NAME/TITLE: |
| BUSINESS PHONE/FAX: |
| SCOPE OF WORK: |

**REFERENCE TWO:**

|  |
| --- |
| COMPANY NAME: |
| ADDRESS/CITY/STATE/ZIP: |
| CONTACT NAME/TITLE: |
| BUSINESS PHONE/FAX: |
| SCOPE OF WORK: |

**REFERENCE THREE:**

|  |
| --- |
| COMPANY NAME: |
| ADDRESS/CITY/STATE/ZIP: |
| CONTACT NAME/TITLE: |
| BUSINESS PHONE/FAX: |
| SCOPE OF WORK: |