



**MUWG**  
MAXIMO UTILITY WORKING GROUP

## **New Vendor Registration Form**

Company Name:

Address:

City, State, Zip Code:

Phone:

Web Site:

Primary Contact Name:

Phone:

E-mail:

**Business or Service Provided:**

**Utility Sectors Served:**

**Provide the name of one Utility Client that would recommend your business or services provided:**

**Name and contact information of individual coordinating event if different from the Primary contact above:**

**Return this completed form to Rick Ulrich at [rickulrich@muwg.org](mailto:rickulrich@muwg.org)**