CLEAN WATER of New York, Inc.

Application for Vendor Authorization

Vendor's Name:		
Vessel or Tug Name:		
Vendor's Contact Name:		
Vendor's Contact Title:		
Telephone:		
Email Address:		
Requested Date of Access/Use:		
Vendor's Employees/Contractors Name(s):		TWIC YES NO
If unknown send list prior to service		☐ ☐
Send Email List To: Plant@cwofny.com		☐ ☐
		☐ ☐
		☐ ☐
Specific areas requiring service:		
Compartment number(s):		
Spaces or other areas:		
Comment or special instructions:		

By signing this Application for Vendor Authorization, the undersigned, on behalf of the Vendor set forth above, and with its authorization, warrants that: (i) Vendor has read the terms of the Vendor Authorization available at www.cwofny.com/vendor-authorization-terms-and-conditions (the "Terms"); (ii) accepts and agrees the Terms are expressly made a part hereof; (iii) the authorization contemplated by Vendor's Application is conditioned upon Vendor's acceptance and agreement of the Terms; (iv) the Terms impose upon Vendor insurance requirements and indemnification, defense, and hold harmless duties, even for the negligence of Clean Water of New York, Inc., and Vendor agrees and accepts to be bound by those duties and all of the Terms.

Signature (on behalf of Vendor):	
Printed Name:	
Title:	