

# Vendor Information Form

(Instructions on reverse side of this form)

|            |                          |               |                          |               |                          |                 |                          |
|------------|--------------------------|---------------|--------------------------|---------------|--------------------------|-----------------|--------------------------|
| Add Vendor | <input type="checkbox"/> | Change Vendor | <input type="checkbox"/> | Delete Vendor | <input type="checkbox"/> | License Renewal | <input type="checkbox"/> |
|------------|--------------------------|---------------|--------------------------|---------------|--------------------------|-----------------|--------------------------|

## Purchase Order Address:

Vendor/Company Name \_\_\_\_\_

Address Line 1 \_\_\_\_\_

Address Line 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code 54304

Purchase Order Email address \_\_\_\_\_

## Remit To Address:

Vendor/Company Name \_\_\_\_\_

Address Line 1 \_\_\_\_\_

Address Line 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

## Business Information:

Doing Business As: TANF CUSTOMER

Contact \_\_\_\_\_ Email: \_\_\_\_\_

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

Federal ID# \_\_\_\_\_ - or - Soc. Security # \_\_\_\_\_

Vendor Payment Terms \_\_\_\_\_ Dun & Bradstreet # \_\_\_\_\_

(Please note: If none specified will default to NET30)

Product/Services to be provided: \_\_\_\_\_

Oneida Contact \_\_\_\_\_ Phone/EXT#: \_\_\_\_\_

Oneida Business Unit \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE NOTE:** The following section is **required** and will not be accepted if left blank.

Are you now, or have you ever been debarred? Yes  No

If Yes, Please explain \_\_\_\_\_

Vendor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Vendor Information Form Instructions

Carefully read the following instructions. This document cannot be processed by Purchasing or Accounts Payable if it is not filled out accurately, completely, and legibly. Any form not meeting these requirements **MAY BE RETURNED** to the person requesting the vendor. It is the responsibility of the person requesting the vendor to obtain all required information.

**Your cooperation will streamline and expedite this process.**

- **Add Vendor/Change Vendor/Delete Vendor:** Please place an “✓” through the box which represents the process you would like the purchasing or A/P dept. to take when processing this form.
- **Vendor Renewal:** Please place a “✓” for this box if you are just renewing your annual vendor license.

## **Purchase Order Address:**

- **Vendor/Company Name:** Full name of company or vendor. No abbreviations should be used unless it is legally part of the registered company or vendor's name. Inappropriate use of abbreviations may cause duplication of vendor setup. The name listed should match what is on your W-9 form.
- **Purchase Order Email Address:** The email address should be where we submit PO's to place orders.

## **Remit To Information:**

- **Remit to information:** This section must be completed if the payment is to be sent to an address other than the one indicated above.

## **Business Information:**

- **Doing Business As:** If the vendor is doing business with a SSN then we must have the DBA designation for their business. This is required for 1099 purposes.
- **Contact:** Please indicate who at your company should be contacted for Purchasing and Licensing questions. Please list their email, phone and fax number.
- **Federal ID# or SSN:** Federal law requires that we have one of these two numbers on file. Each vendor set up must have either a Federal ID# or Social Security # at the time of vendor entry. If you indicated a SSN, you must provide the full name of the person that is associated with that SSN.
- **Payment terms:** Please indicate what payment terms you would prefer to be set up as, if none are specified the default is NET30.
- **Dun & Bradstreet #:** The D&B D-U-N-S Number is a unique nine-digit identifier for businesses. It is used to establish a business credit file, which is often referenced by lenders and potential business partners to help predict the reliability and/or financial stability of the company in question.
- **Oneida Contact:** Please indicate the Oneida employee & their department name so we can notify them when your vendor set up has been completed.
- **Debarment:** The Oneida Nation is required to verify that contractors are not suspended or debarred. Companies will be verified for eligibility for procurement through the System for Awarded Management (SAM.gov). Companies that have been debarred will be ineligible to be used by the Oneida Nation.