



# VENDOR INFORMATION FORM

*This form should only be used for the following: 1) Vendors not in the system, 2) Updating information for vendors already in the system. (Be sure to determine if the remittance (check) address is different)*

**PLEASE CHECK THE VENDOR LIST THOROUGHLY BEFORE COMPLETING THIS FORM.**

**W-9** Request for Taxpayer Identification Number and Certification  
(must accompany all new vendor requests)

Federal ID # (TIN) or Social Security Number (if taxpayer is an individual): \_\_\_\_\_

### VENDOR ADDRESS INFORMATION (FOR ORDER PLACEMENT)

### REMITTANCE (CHECK) ADDRESS INFORMATION (IF DIFFERENT FROM VENDOR ADDRESS)

Name: \_\_\_\_\_

\_\_\_\_\_

2<sup>nd</sup> Name: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

2<sup>nd</sup> Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_

\_\_\_\_\_

State: \_\_\_\_\_

\_\_\_\_\_

Zip Code: \_\_\_\_\_

\_\_\_\_\_

Country: \_\_\_\_\_

\_\_\_\_\_

**\*\*Phone # is Mandatory \*\***

Telephone : (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
\_\_\_\_\_

Web Site:

FAX Number : (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
\_\_\_\_\_

Email Address:

**Please Note: If a vendor in the system has different information, it is your responsibility to verify with the vendor if a change is necessary.**

Preparer: \_\_\_\_\_

Please print and send or email to [dscott@c-tec.edu](mailto:dscott@c-tec.edu) have her complete your request.