

Vendor #

VENDOR INFORMATION TEMPLATE

Completion of this form is required to establish your company as a BGS supplier.

VENDOR LOCATION

Company Name/Address

Company Name:

DBA (If applicable):

Address:

City:

State:

Country:

Postal Code:

Payment Address (If Different)

Billing POC:

Billing POC Email:

Address:

City:

State:

Country:

Postal Code:

VENDOR CONTRACTUAL POINT OF CONTACT

Name:

Phone Number:

Title:

Fax Number:

Email:

VENDOR INFORMATION

Business Classification: Large Small Non-Profit Foreign College or University

Payment Terms:

DUNS#:

Primary NAICS:

Vendor Represents Itself As: *(Check all that apply)*

Woman-Owned Veteran-Owned Service Disabled Veteran-Owned Alaskan Native Corporations and Indian Tribes

Disadvantaged Historical Black Colleges & Universities/Minority Institutes

HUBZone Certification Number: Certification Date:

REQUEST FOR TAXPAYER ID NUMBER & CERTIFICATION (Substitute for W-9)

Check Appropriate Box for Federal Tax Classification: **(additional documentation may be required based on your classification)**

Individual/Sole Proprietor LLC C Corporation S Corporation Partnership Trust/Estate Exempt Payee

Specify LLC Type: LLC C Corp LLC S Corp LLC Partnership

Questions regarding business types may be directed to BGSaccounts payable@belcan.com

Tax ID #: OR SSN #:

If you would like to obtain an EIN, please visit [IRS EIN Assistant](#) to apply.

CERTIFICATION: Under penalties of perjury, I certify that: 1) the number shown on this form is the correct T.I.N., 2) I am not subject to backup withholding because a) I am exempt from backup withholding, or b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends or c) the IRS has notified me that I am no longer subject to backup withholding, and I am a U.S. citizen or other U.S. person (Including U.S. resident alien).

Printed Name of Authorized Vendor Representative:

Title of Authorized Vendor Representative:

Signature of Authorized Vender Representative:

Date: