



City of Fayetteville

Purchasing Division

433 Hay Street, 2nd Floor, Fayetteville, NC 28301

Phone: 910-433-1942 Fax: 910-433-1680 Email: CityCOFPurchasingDept@FayettevilleNC.gov

Vendor Registration Form

Note: All fields on this form must be complete to process your registration.

☐ New Registration

☐ Update Existing Record

Vendor ID _____

Date of Completion: _____

Company Name: _____

At least one Contact Name, Phone #, and Email Address is required to complete Vendor Registration

<u>Company Headquarters Physical Address</u> (No PO Box #'s) Street Address: _____ _____ City: _____ State: _____ Zip: _____ County (For NC Vendors): _____	<u>Company Contact Information</u> Contact Name: _____ Job Title: _____ Email: _____ _____ Phone#: _____ Fax #: _____
<u>Payment Mailing Address</u> ☐ Use Company Headquarters Physical Address (Company Name / Payment Address as shown on Invoice) Company Name: _____ Street Address: _____ _____ City: _____ State: _____ Zip: _____ Standard Payment Terms: _____	<u>Purchase Order Mailing Address</u> ☐ Use Company Headquarters Physical Address Company Name: _____ Street Address: _____ _____ City: _____ State: _____ Zip: _____ Shipping Terms: _____
<u>Payment Contact Information</u> ☐ Use Company Contact Information Contact Name: _____ Job Title: _____ Email: _____ _____ Phone#: _____ Fax #: _____	<u>Purchasing Contact Information</u> ☐ Use Company Contact Information Contact Name: _____ Job Title: _____ Email: _____ _____ Phone#: _____ Fax #: _____



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Taxpayer Identification Number

The city requires a taxpayer identification number in order to register. It may be either an employer identification number (EIN) issued by the IRS, or your social security number. If you receive payment from the City, your tax ID number will be reported to the Internal Revenue Service for federal tax withholding purposes. Failure to provide a tax ID number may result in: (a) federal tax backup withholding; (b) withholding of payment by the City; and / or (c) disqualification from participating in City contracts. For information on obtaining an EIN, go to the link listed below.

<https://www.irs.gov/businesses/small-businesses-self-employed/apply-for-an-employer-identification-number-ein-online>

Tax ID # _____

Please list at least 3 business references for your services

<u>Reference 1</u>	<u>Reference 2</u>
Name: _____	Name: _____
Title: _____	Title: _____
Organization: _____	Organization: _____
Phone: () -	Phone: () -
Email: _____	Email: _____
<u>Reference 3</u>	<u>Reference 4</u>
Name: _____	Name: _____
Title: _____	Title: _____
Organization: _____	Organization: _____
Phone: () -	Phone: () -
Email: _____	Email: _____

☐ I certify that all information provided by this Vendor Registration Form is accurate and complete in all respects.

Signature: _____

Date: _____

Print Name: _____

Completed form, **current W9** and any other information you would like to provide can be emailed to CityCOFPurchasingDept@FayettevilleNC.gov (preferred), faxed to 910-433-1680 or send via postal mail to:



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City of Fayetteville

Purchasing Department

c/o: Vendor Registration

433 Hay Street

2nd Floor Finance Office

Fayetteville, NC 28301-5537