

VENDOR CREATION/AMENDMENT REQUEST

Please select one:

Create

Amend

Delete

Additional site

PART 1 (Mandatory fields)

Vendor

Address

State

Postcode

ABNNumber

(Specify if registered company)

Contact name

Signature

Phone number

Fax Number

PART 2 (Mandatory fields)

Bank Account Details

Institution Name:

Branch:

Title of Account:

Financial Institution code:

Bank Certification

Account number:

I have confirmed with the supplier that this bank account is valid

I can confirm that I have no conflict of interest issues in the creation of this supplier

EFT Remittance & Advice Preference - Please tick preferred method

Email address

Fax number

Postal address

Corporate Services use only

Requested by (please print)

Signature

Vendor Number