

SUPPLIER REGISTRATION FORM



Visa Profile Information (Completed by Visa)		Oracle Supplier ID:	
Visa Requester:		Date:	Entity:
Sub-region:	SIRA ID:	Supplier Risk Score:	
Please check one:	New Supplier <input type="checkbox"/> Purchasing Site Setup (PO Supplier)	Existing Supplier <input type="checkbox"/> Name Change Request <input type="checkbox"/> Update Information	
Supplier Type:	<input type="checkbox"/> Supplier <input type="checkbox"/> Contribution <input type="checkbox"/> Employee <input type="checkbox"/> Fringe <input type="checkbox"/> Government/Tax Agency <input type="checkbox"/> Legal <input type="checkbox"/> Client <input type="checkbox"/> Promo. Partner <input type="checkbox"/> Recruit <input type="checkbox"/> Landlord <input type="checkbox"/> Sponsorship <input type="checkbox"/> Utility <input type="checkbox"/> Visa Director/Advisor <input type="checkbox"/> Visa IC		
Anticipated annual spend in USD:		Payment Terms:	Payment Currency:

Part 1: Supplier Information (Completed by Supplier)			
Supplier Legal Name:		Tax ID / Registration ID: <small>(See Part 5 for definitions)</small>	
Existing Supplier Name: <small>(Applicable for name changes)</small>			
Primary Contact:		Primary Contact Phone: () -	
Contact Fax: () -		Primary Contact Email:	
URL:		State/Country Incorporated:	
Dun & Bradstreet#, Teikoku Data Bank#, SERASA, or equivalent: *		# Permanent/full time employees:	

*If you don't have a D&B#, TDB#, or Serasa please provide your company's latest 2 years of audited financial statements.

Addresses:	Company HQ	PO Mailing	Remit-To Mailing
Company Name:			
Address Line 1:			
Address Line 2:			
City, State/Province, Postal code, Country			
Phone:			
Fax:			
E-mail:			

1) Does your company currently have any open litigation? YES NO

If yes, please provide a description of the litigation: _____

2) To the best of your knowledge, does any Visa employee, contractor or consultant have any ownership interest in the supplier either directly or indirectly through another party? YES NO

If yes, please indicate the type of interest: _____

Part 2: Payment Information (Completed by Supplier)

2.1 US Based Suppliers contracting with Visa USA and Inovant

Visa requests all US Based suppliers to accept payment card for invoice payments in order to expedite receipt and reduce the risk of lost payments. Will you be able to accept Purchasing Card payment?

- Yes* - Please complete the following information:
- Company contact information of Accounts Receivable Manager or Company Official Representative:
 Name: _____ Email: _____ Phone number: _____
 - Email address for payment notification: _____
- No - Please provide an explanation: _____. (Proceed to **2.2 A**)

2.2 All other suppliers

- A.** Do you accept payments via direct deposit/Visa direct payment to Supplier's bank account?
- YES –Please provide the following information on your company's letterhead
- Bank Name/Branch Address 2) Account Name 3) Account number 4) Routing/ABA number(USA) / Sort Code(UK) / Transit#(CA)
 - Account Currency 6) SWIFT Code 7) IBAN code (EU based suppliers) 8) Email address for remittance notification
- No

* Note the standard processing fees administered by your merchant bank will apply. We encourage you to review your merchant account agreement and discuss ways to achieve the most favorable rates with your bank.

Part 3: Supplier Capabilities: (Completed by Supplier)

Identify the types of products or services provided by your company. Check all that apply:

<u>General</u>	<u>INFORMATION TECHNOLOGY</u>	<u>Marketing</u>	<u>Others</u>
<input type="checkbox"/> Contingent Labor	<input type="checkbox"/> Application Service Provider	<input type="checkbox"/> Advertising	<input type="checkbox"/> Construction
<input type="checkbox"/> Dues/Subscription	<input type="checkbox"/> Design/Development	<input type="checkbox"/> Brand Identity	<input type="checkbox"/> Event Management
<input type="checkbox"/> Membership	<input type="checkbox"/> Hardware _____	<input type="checkbox"/> Market Research	<input type="checkbox"/> Facility Support Systems
<input type="checkbox"/> Sponsorship	<input type="checkbox"/> Network - PL	<input type="checkbox"/> Marketing Services	<input type="checkbox"/> HR Related Services
<input type="checkbox"/> MRO Supplies	<input type="checkbox"/> Software _____	<input type="checkbox"/> Printing Services	<input type="checkbox"/> Lobbying
<input type="checkbox"/> Non-IT Goods	<input type="checkbox"/> Storage	<input type="checkbox"/> Promotional (Items)	<input type="checkbox"/> Real Estate
<input type="checkbox"/> Outsourcing Services	<input type="checkbox"/> Telecom	<input type="checkbox"/> Public Relations	<input type="checkbox"/> Transportation or Freight
<input type="checkbox"/> Professional/Consulting Services		<input type="checkbox"/> Media Agency	<input type="checkbox"/> Training

Part 4: Supplier Diversity (USA based suppliers): (Completed by Supplier)

If your company is certified as a diverse supplier, choose the applicable categories listed below (please check all that apply):

Note: Your organization must be certified by a qualified agency

<input type="checkbox"/> Minority Owned Business (MBE)	<input type="checkbox"/> Women Owned Business (WBE)
<input type="checkbox"/> Disabled Veteran-Owned Business (DVBE)	<input type="checkbox"/> Disabled-Owned Business
<input type="checkbox"/> Historically Underutilized Business (HUB) Zone	<input type="checkbox"/> Small Business Administration (SBA)

Part 5: Required Documentation: (Completed by Supplier)

Please provide the following documentation in addition to this form.

- For U.S. based supplier providing services in the U.S., provide a W-9.
- For non U.S. based suppliers receiving payment for services provided to the U.S.A., a W-8 (Required by US law)
- For non U.S. based suppliers providing services outside the U.S., provide a Country Registration ID number

<input type="checkbox"/> Country Registration ID, W8/W9	<input type="checkbox"/> Diversity Certificate (USA based suppliers only)
<input type="checkbox"/> Banking Information on company letterhead	

You may submit the requested information by:

E-mail or Fax:

Refer to the information on the e-mail request from your Visa business contact.

Please note that Visa is required to retain a copy of Form W-8/W-9

Electronic copies of Form W-8 are accepted, but an original copy must follow.