City & County of San Francisco Vendor Profile Application
New Vendor Number Request (Vendor Add)

Date: _____

For City employee reimbursements, do not use this form; please see your Department liaison about getting an Employee Reimbursement Number.

This form is to be used for adding vendors to the City's vendor file, which is used by the City's Accounting and Purchasing Systems in generating payments and puchase orders.

The granting of a vendor number does not mean that the vendor is a City compliant and approved vendor.

Please read and follow the separate instructions for this form.

VENDOR NUMBER ASSIGNED
Vendor File Use Only

1. a. Who is making this request?

Requester's Name: _____

Requester's Phone Number: _____

Requester's Email Address: _____

b. Requester's relationship to Vendor (please check one box):

☐ Owner/Partner (specify job title below if applicable) _____

☐ Vendor representative (i.e. "CFO", "Executive Director", "Manager", etc. - specify job title below if applicable) _____

☐ City employee requesting on behalf of the City. I have no other involvement with this vendor (Specify your City department and job title below). _____

☐ Other (explain below): _____

2. Reason for new vendor request? (check one box):

a. ☐ Direct Purchase Order or Blanket Purchase Order for commodities (payment for goods or services)

b. ☐ Professional Services or Construction Contract

c. ☐ Bid Proposal (submit bid for goods or services)

d. ☐ Grant Agreement (generally for community-based or non-profit organizations)

e. ☐ Other (explain in full): _____

3. ☐ **You must attach a complete & signed IRS W-9 form. Vendor numbers are not assigned without a W-9 form.**

4. Is any owner, partner, contractor, employee or employee family member of this vendor also a current or former City employee?

☐ No

☐ Yes: Please explain the relationship of the current or former City employee to this vendor. _____

5. Type of Organization (You will need to contact the Business Tax Division for a Tax Certificate. Also, if you mark "b" or "c", Business Tax will explain the requirements)

a. ☐ Private business (for profit)

b. ☐ Non-Profit Organization (public organizations, national associations, etc.)

c. ☐ Government and/or Public Agency (schools, government-operated/funded agencies, etc.)

d. ☐ Other (please describe): _____

6. New Vendor Information

Vendor Name: _____ Website: _____

Primary Contact Name: _____ Phone Number: _____

Contact's Title: _____ Fax Number: _____

Toll Free Number: _____ Email Address: _____

Vendor File Support Use Only

Date add made: _____ Entry reviewed by: _____

Vendor add done by: _____ Entry review date: _____

Turn <over> to complete application

Form VenAdd-2010-09

City & County of San Francisco Vendor Profile Application - continued
New Vendor Number Request (Vendor Add)- continued

7. Vendor Business Address (es)

General Business Address (Street/City/State/ZIP)	Bid Address (if different from General)
Purchase Order Address (if different)	Payment/Remittance Address (if different)

8. The City and County of San Francisco provides Automated Clearing House (ACH) payments through Bank of America Merrill Lynch's PayMode-X. This service deposits daily electronic payments directly into your bank account. There is no charge from the City or Paymode-X to use this service. This is the City's preferred method of providing payment. Please visit the following website to sign up:

http://www.sfgov.org/ach

Primary Contact: _____ Phone: _____ Email: _____

If you are already a Paymode-X user, please let us know by sending an email to ACH.Support@sfgov.org.

9. Vendor Commodity and Service Codes:

example: 9720-09

_____ _____ _____ _____

_____ _____ _____ _____

_____ _____ _____ _____

Commodities and/or Services not listed (provide detailed description:

_____

_____

10. Completing and Returning Application

Name of Person Completing Form: _____

Title: _____

Handwritten Signature: _____

Date: _____

Return completed Application to one of the following four destination options (Please choose one option only):

a. ☐ **Mail to:** **Vendor Profile Application**
City and County of San Francisco
Vendor File Support
City Hall, Room 484
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102-4685

b. ☐ **Fax to: (415) 554-6261**

c. ☐ **Email to: Vendor.File.Support@sfgov.org**

note: if using email, you must scan page 2 (this page) of the application with your handwritten signature and send as an Adobe PDF file.

d. ☐ **Interoffice Mail:** **Vendor File Support**
City Hall, Room 484