



Supplier Setup and Change Form

*ALL highlighted items MUST be completed
Any incomplete fields will cause delays and possible rejections*

* FOR CONTITECH COMPLETION ONLY	
Company Code*	
Purchasing Organization*	
Type of Request*	
Vendor Code (for update request)*	

Vendor Master Location	Field	Supplier Entry
Main Business Address & General Data	Supplier's Name (Full Legal Entity Name)*	*
	Supplier's Trading Name (if different from Legal Name include International Name, if any)	
	Physical Street/House number*	*
	Physical Postal Code*	*
	Physical City*	*
	Country*	*
	Region (State, Province)	
	PO Box	
	Postal code (PO Box)	
	City (PO Box)	
	Communication Language*	*
	Contact Name*	*
	Telephone*	*
	FAX*	*
	PO e-mail address*	*
Order From Address (if different from Business address)	Street/House number	
	Postal Code	
	City	
	Country	
	Region (State, Province)	
	PO e-mail address	
Payment Remittance Address (for check payment method) typically Legacy Veyance & US only	Street Address / PO BOX	
	Postal Code	
	City	
	Country	
	Region / State	
Accounts Receivable Contact Information	Accounts Receivable Contact Phone*	*
	Fax Number for Accounts Receivable*	*
	Email for Accounts Receivable*	*
Purchasing Data	Order Currency*	*
Tax information (for US companies please attach a copy of the W-9)	VAT Reg. No.*	*
	Tax Number 1*	*
	Tax Number 2	
	Tax Number 3	

