

# Supplier/Payee Management Form


**Instructions**

This form should not be used to add or update employee or student information.

**This form should be completed for:**

- All new foreign suppliers and payees. The ability to support foreign suppliers and payees through the online self-registration process will be available at a later date.
- Updates/changes to existing suppliers and payees who have not self-registered in the portal.
- Non-Princeton guests who wish to receive reimbursement for their travel-related expenses via ACH. If payment is to be made by check, complete only the online supplier request form in the Prime Marketplace.

**The supplier request process can be completed online via the Prime Marketplace without the use of this form for:**

- New domestic suppliers and payees.
- Non-Princeton guests receiving reimbursement via check.

**1. Supplier Information**
☐ US Individual   ☐ US Entity   ☐ Foreign Individual   ☐ Foreign Entity

EXISTING SUPPLIER ID NUMBER (REQUIRED FOR UPDATES ONLY)

NAME (AS SHOWN ON INCOME TAX RETURN)

DOING BUSINESS AS (DBA) (IF DIFFERENT FROM NAME)

**2. Address Information**
**2a. Permanent Address:**   ☐ Add New   ☐ Update Existing

PERMANENT STREET ADDRESS

CITY

STATE/PROVINCE

POSTAL CODE

COUNTRY

PHONE

EMAIL

**2b. Ordering Address:**   ☐ Check if same as Permanent

ORDER STREET ADDRESS

CITY

STATE/PROVINCE

POSTAL CODE

COUNTRY

EMAIL

**3. Description & Timing of Goods/Services to be Provided**
**3a. Business Classification**

(Check one if applicable)

- ☐ Educational Institution  
☐ Non-Profit Organization  
☐ Federal/State/Local Government

**3b. Diversity Classification**

(Check all that apply)

- ☐ 8(a) Business Development   ☐ Minority Business Enterprise   ☐ Service Disabled Veteran  
☐ HUBZone Small Business   ☐ Small Business Enterprise   ☐ Veteran Owned Business  
☐ LGBT Owned Business   ☐ Small Disadvantaged Business   ☐ Women Business Enterprise  
☐ Woman Owned Large Business

**4. Payment Selection**

REMIT EMAIL ADDRESS (REQUIRED FOR ALL PAYMENT TYPES)

**4. Payment Selection - continued** (Choose one payment method)

- ☐ ePayables: Suppliers receive a unique credit card number which they use to settle approved invoices. Payment is immediate upon receipt and approval.
- ☐ Electronic Funds Transfer (EFT): Suppliers may choose from the following terms. Guest reimbursements and honoraria are processed with immediate terms.
- ☐ 4%/3 days, Net 15      ☐ 3%/5 days, Net 20      ☐ 2%/10 days, Net 30      ☐ 1%/20 days, Net 30      ☐ Net 30
- ☐ Wire: For foreign bank payments only. Wires will be in USD(\$), unless specified here: WIRE CURRENCY

**PLEASE PROVIDE BANKING INFORMATION BELOW:**

BANK NAME		COUNTRY
BANK ADDRESS		
CITY	STATE/PROVINCE	POSTAL
ROUTING (US)/SWIFT (NON-US) (REQUIRED)		ACCOUNT NUMBER OR IBAN (ONE IS REQUIRED)

- ☐ Paper Check: Net 45 days. Send payment to: ☐ Permanent Address ☐ Order Address ☐ Other Address
- OTHER ADDRESS

**5. Independent Contractor Certification** (Required for Independent Contractors Only)

- a. I AM NOT CURRENTLY AN EMPLOYEE OF PRINCETON UNIVERSITY, NOR HAVE I RECEIVED PAYMENTS FROM THE UNIVERSITY WITHIN THE LAST YEAR. ☐ Yes ☐ No
- b. I WILL RECEIVE A FLAT FEE FOR MY SERVICES. ☐ Yes ☐ No
- c. I WILL CONTROL THE MANNER AND THE DIRECTION IN WHICH THE SERVICES WILL BE PROVIDED. ☐ Yes ☐ No
- d. I ROUTINELY PROVIDE THE SAME OR SIMILAR SERVICES TO OTHER (NON-PRINCETON) CUSTOMERS AS PART OF A CONTINUING TRADE OR BUSINESS. ☐ Yes ☐ No
- e. I AM RESPONSIBLE FOR SUPPLYING (AND PAYING FOR) ANY EQUIPMENT AND/OR WORKERS REQUIRED TO PROVIDE THE SERVICES. ☐ Yes ☐ No
- f. I WILL UTILIZE UNIVERSITY SPACE AND/OR OTHER FACILITIES TO PERFORM MY SERVICES. ☐ Yes ☐ No
- g. ALL EXPENSES INCIDENTAL TO THE PERFORMANCE OF MY DUTIES FOR THE UNIVERSITY, INCLUDING TRAVEL EXPENSES, ARE TO BE BORNE BY ME (UNLESS REIMBURSEMENT IS PERMITTED IN THE TERMS OF THE CONTRACT AND INVOICED WITH APPROPRIATE DOCUMENTATION). ☐ Yes ☐ No
- h. I AM PROVIDING ADDITIONAL INFORMATION WHICH MAY BE RELEVANT TO THE DETERMINATION OF MY STATUS AS AN INDEPENDENT CONTRACTOR (E.G., COPIES OF INVOICES TO OTHER CUSTOMERS, NEWSPAPER AND/OR YELLOW PAGES ADVERTISEMENTS, BUSINESS CARDS, ETC). ☐ Yes ☐ No
- i. I AM NOT ECONOMICALLY DEPENDENT ON PRINCETON UNIVERSITY. ☐ Yes ☐ No

I hereby certify that I am entitled to claim independent contractor status and that I have complied with all business licensing requirements. I certify that I pay my own federal, state, and city income/social security and other taxes in accordance with estimated tax payment requirements. I acknowledge that, as an independent contractor, I am not eligible for workers compensation, unemployment compensation or other University employee benefits. I understand that the University will issue a Form 1099-MISC to independent contractors who receive over six hundred dollars in remuneration during a calendar year. If a Foreign National or Entity, then I expect to receive a 1042-S reporting form. I acknowledge that providing false information will result in my not being eligible to contract with the University in the future, and may result in further penalties. **\*Check for Certification** ☐ Yes

**6. Supplier Certification** (Required for All Suppliers/Payees)

To be signed only by persons authorized to complete this form.

PRINT NAME	SIGNATURE	DATE
TITLE	EMAIL	
COMMENTS		

- **Suppliers/payees: Complete and submit this form to your contact at Princeton University.**
- **University employees: Upload and submit the completed document via the supplier request form in the Prime Marketplace.**