

SUPPLIER ACCOUNT REQUEST FORM

Supplier Information			
Company Legal Name	☐ General Contractor, A	☐ General Contractor, Architect, or Engineer	
	☐ Diverse Supplier		
Website	□ Sole Proprietor*		
Mailing Address	(i.e. Consultants or Inc	* New supplier requests for Sole Proprietors (i.e. Consultants or Independent Contractors) must include a signed Compliance Statement.	
	Invoice Currency O Canadian (CAD)	○ U.S. (USD)	
Billing Address (if different from Mailing)	Other:	(USD)	
	Note: Standard payment	terms are net 35 days.	
	GST/HST No.*		
Supplier Contact			
Name	·	* Required for suppliers operating in Canada. Validate the supplier's tax registration on the CRA registry.	
Email Phone	If the supplier meets the requirements for Small Supplier Status, a signed Small Supplier Certification		
Additional Information			
Departmental Information			
Requestor Name			
Department/Division			
Email	ail Phone		
Acknowledgement			
I hereby acknowledge this supplier requise accurate.	uest is made to transact only University business ar	nd the information provided	
Signature	Name	Date	
Signature	IVallic	Date	