

**New Supplier Set-up Request**

Requester's Name: \_\_\_\_\_  
Site/Dept Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Please fill in the following details regarding the new supplier.

Supplier's Name: \_\_\_\_\_  
Service(s)/Product(s): \_\_\_\_\_  
Supplier's Address: \_\_\_\_\_  
\_\_\_\_\_

Key Contact/Title: \_\_\_\_\_

Supplier's Phone: \_\_\_\_\_  
Supplier's Fax: \_\_\_\_\_

Tax ID \_\_\_\_\_ W-9 on File: Yes \_\_\_ No \_\_\_  
(Tax ID is required before a vendor will be set up.)

**Is there an existing Webster supplier capable of providing the product(s) or service(s) you require?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**Why is this supplier required?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Is this new supplier certified as a minority or women-owned business? If yes, state what certification.**

Yes \_\_\_\_\_ No \_\_\_\_\_

Certified by \_\_\_\_\_ /# \_\_\_\_\_

Payment Terms: Net 30 \_\_\_\_\_ Net 45 \_\_\_\_\_

**Please send this form to:**

**Webster University**  
Procurement Services  
470 East Lockwood Ave.  
St. Louis MO 63119  
Fax: 314-963-6929  
Phone: 314-968-6969

Approved: \_\_\_\_\_

**Webster University**