**VENDOR/SUPPLIER FORM**

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| --- | --- |
| **FOR INTERNAL USE ONLY** | |
| Requestor’s Name : |  |
| Vendor/Supplier Type10: | Choose an item. |
| UN Index No (for staff only): |  |
| ATLAS Vendor/Supplier No: |  |
| Creation Date: |  |
| Payment Currency (as specified in contract) |  |

*Please tick where applicable:*

|  |  |
| --- | --- |
|  | *New Submission – for first time submission only* |
|  | *Profile Update – for purposes of updating vendor/Supplier profile information. Please check either one of the boxes below:*  *The updated information provided herein supersedes and replaces existing information previously registered in the system. Please invalidate previous information registered in the system.*  *The updated information provided herein is additional information. Please retain previous information registered in the system.* |

*Instructions to Vendors/Suppliers*

1. *You are required to submit this Vendor/Supplier Form duly completed (in English), signed and stamped.*
2. *Please complete Sections 1, 2 and 3 below in print or legible handwriting. To ensure accuracy and completeness of your information and personal data, all fields should be completed. Please insert NA if not applicable.*
3. *Your information and personal data will strictly be used for the purpose of payment processing and will be held in confidence. Access to your information and personal data are strictly limited to UNU’s authorized employees and agents on a “need-to-know” basis.*
4. *Incomplete or erroneous information or personal data will prevent final credit of payments to your account.*
5. *Payment shall be made in the currency specified in your contract with the UN University (UNU). You are required to maintain a bank account denominated in the currency of payment which is maintained in the country where your bank account is domiciled. All risks, charges and costs imposed by your bank and/or those of the intermediary bank/s shall be borne by you. The UNU shall absorb and bear all risks, charges and costs imposed by the UNU’s bank.*
6. *If you wish to request access, verification, rectification and/or deletion of your information and personal data or if you have any queries regarding this Vendor/supplier Form, please contact the operations team at UNU centre of Administration, Malaysia at* [*operations-kl@unu.edu*](mailto:operations-kl@unu.edu)
7. *Send[[1]](#footnote-1) completed Vendor/Supplier Form to*      [[2]](#footnote-2)*.*

*I/We hereby agree that unless otherwise notified by me/us in writing, UNU may settle its financial obligations to me/us by Electronic Funds Transfer to the bank account provided herein and that such a transfer will constitute a payment to me/us.*

*I/We understand and acknowledge that my/our personal data provided under this Vendor/Supplier Form will be processed by UNU in accordance with the* [*UNU Policy on Personal Data Protection*](https://i.unu.edu/media/unu.edu/attachment/105908/UNU-Policy-on-Personal-Data-Protection-Policy.pdf)*, and UNU will retain my/our personal data only for the period necessary to process payments in my/our favour, unless UNU has an obligation to preserve my/our personal data for administrative, fiscal, legal, scientific, historical or informational value, or otherwise in accordance with UNU’s retention policies.*

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*[[3]](#footnote-3)Signature of Payee/Authorized Signatory*

*Name:*

*Title:*

*Date*:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **SECTION 1** | **PAYEE INFORMATION (Individual or Company)** | | | | | | |
| Full Name: | *(for individual, please write your last name/surname in CAPITAL/ UPPERCASE letters, example: John DOE)* | | | | | | |
| Nationality *(for individual):* |  | | | Gender *(for individual):* Male  Female | | | |
| Address[[4]](#footnote-4): | *Street Address:* | | | | | | *City:* |
| *State:* | | *Postcode:* | | | | *Country:* |
| Contact Person *(for company)*: | *Name:* | | | | | | |
| Contact Details: | *Email:*       *Tel:*       *Fax No:* | | | | | | |
| Tax Details*9*:  *(refer list of country that require tax details in footnote)* | *Tax Organization type:* | | | | Tax Country:Choose an item. | | |
| *Tax number:* | | | |  | | |
| **SECTION 2** | **BANKING INFORMATION[[5]](#footnote-5)** | | | | | | |
| Account Holder Name[[6]](#footnote-6): |  | | | | | | |
| Account Details: | Bank Account No: | | | | Account Currency: | | |
| IBAN *(required for EU):* | | | | Account Type *(please tick):*  Savings  Current  Checking  Other, *please specify[[7]](#footnote-7)* | | |
| Name of Bank: | *(official name in full):* | | | | Branch Name:  Branch Number: | | |
| Address: | *Street Address:* | | | | | *City:* | |
| *State:* | | *Postcode:* | | | *Country:* | |
| Bank Identification (ID) information[[8]](#footnote-8):  *(based on country)* | Japan | Routing Code *(4 digit bank number plus 3 digit branch number)* | | | | | |
| United States | 1. Routing number for ACH/electronic payment (9 digits)  2. Swift code for wire transfer (8 or 11 characters) | | | | | |
| Other *(specify):* | Swift Code *(8 or 11 characters)*  Local Routing Code (if Applicable) | | | | | |
| Special Instructions: |  | | | | | | |
| **SECTION 3** | **BANKING INFORMATION FOR INTERMEDIARY/CORRESPONDENT BANK *(As applicable)*** | | | | | | |
| Name of Bank |  | | | | | SWIFT Code: | |
| Address: | *Street Address:* | | | | | *City:* | |
| *State:* | | *Postcode:* | | | *Country:* | |
| Bank Account No.: | *(Bank account number of beneficiary bank with intermediary bank)* | | | | | | |

1. *Original, fax or scanned copies are acceptable* [↑](#footnote-ref-1)
2. *Please indicate the name of the person in the UNU who requested you to complete this Form* [↑](#footnote-ref-2)
3. *Signature of Payee is mandatory. For individuals, the Payee signs. For Companies/ Institutes/ Organizations, the authorized signatory should sign and affix their Company’s/Institute’s/Organization’s official stamp. If the Company/Institute/Organization does not have a company stamp, please indicate the name of the signatory and title.*  [↑](#footnote-ref-3)
4. *This address should be the same address appearing in the Purchase Order, Contract or Agreement with UNU.*  [↑](#footnote-ref-4)
5. *You should provide only one bank account, if for some reason another bank account is required to be registered, please submit a separate Vendor/Supplier Form and specify under “Special Instructions”, which is the default bank account.*  [↑](#footnote-ref-5)
6. *If you require a payment to be made to an alias (a.k.a.) or Doing Business As (d.b.a.) name or a Pay Agent, the identification of the a.k.a./d.b.a. name of Pay Agent must be included in the contract of agreement with the UNU. Please explain the use of an alias or d.b.a. name and its relationship with the designated Pay Agent under “Special Instructions”.* [↑](#footnote-ref-6)
7. *Other types of bank account include but are not limited to Business account and Trust fund.* [↑](#footnote-ref-7)
8. *A bank identification ID is a bank code assigned by a central bank to all licensed banks in a particular country, which identifies the beneficiary bank. This is a requirement for all funds transfers. Please contact your bank (transfer department) to ask for the requisite bank identification (ID) information.*

   *9 List of countries that requires tax registration: Argentina, Bolivia, Brazil, Chile, Colombia, Costa Rica, Cuba, Dominican Republic, Ecuador, El Salvador, Guatemala, Mexico, Panama, Paraguay, Peru, Uruguay, Venezuela, Jamaica.*

   *10 Supplier other than Staff Member, PSA and CTC requires proof of UNGM sanction check as supporting for registration – to be checked by UNU*  [↑](#footnote-ref-8)