**Purchase to Pay**

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# New Vendor request Form

## Part 1: To be completed by Supplier

| 1 | Supplier Name | Blank |
| --- | --- | --- |
| 1a | Trading Name (if applicable) | Blank |
| 2 | Address | Blank |
| 3 | Postcode  | Blank |
| 4 | Bank Account Details | **SORT CODE** | Blank | Blank | - | Blank | Blank | - | Blank | Blank |
| **ACCOUNT NUMBER** | Blank | Blank | Blank | Blank | Blank | Blank | Blank | Blank |
| **CUSTOMER ROLL NUMBER** | Blank |
| **BANK/BUILDING SOCIETY**  | Blank |
| 5 | VAT Registration Number (if applicable) | Blank |
| 6 | Self-Employed?(1) | [ ]  Yes [ ]  No  |
|   | CIS number (if registered)(2) | Blank |
| 8 | Contact Name | Blank |
| 9 | Contact Number | Blank |
| 10 | Contact email address (for remittance advice)(3) | Blank |
| 11 | Contact email address (for delivery of E-Procurement Purchase Orders)(4) | Blank |
| 12 | Annual Turnover of your Organisation?(5) | Blank |
| 13 | Have you attached all the supporting documentation?(6) | [ ]  Yes  |
| 14 | DECLARATION: “I confirm that I have the authority within this Organisation to provide these details and that I agree to the Council’s Standard Terms and Conditions of Business.This includes the processing of my contact details within the Council’s procurement systems both within and outside the UK in line with the Data Protection Act 1998.”Please tick the box to confirm that you are happy to proceed on this basis. [ ]  |
| NAME | SIGNATURE | DATE |
|  |  |  |
| EMAIL |  |
|  |  |

***After completing Part 1 please send the form to the Council Officer who initiated this request***

### Guidance Notes (Part 1) Supplier

1. Only for Self Employed:
	* By ticking this box you are confirming that you are self-employed according to the definition used by HMRC. More guidance regarding self-employed status can be found at the following website:

<http://www.hmrc.gov.uk/calcs/esi.htm>.

* + Please provide a photocopy of your letter from HMRC which confirms your self-employed status and the services you will be supplying.
1. If your organisation is involved with the Construction Industry (and therefore the Construction Industry Scheme ‘CIS’) then you will need to state your CIS number. If your organisation is not involved in the Construction Industry then leave the box blank.
2. This email address may be used for sending remittance advices to suppliers.
3. The Council uses the E-Procurement System, which dispatches purchase orders electronically to your email address. The supplier is reminded that according to the terms and conditions, goods and services must **not** be supplied without a valid purchase order number. The order will be emailed to the nominated address so it is important that the address is monitored and not likely to become inactive in the foreseeable future. There may be a delay in payment without a valid Purchase Order Number.
4. The information which you provide about your turnover helps the Council in its pledge to assist small businesses by endeavouring to pay invoices within 10 working days. If you feel that your organisation would not qualify as a small business you may leave the box blank.
5. The European Commission definition of an SME.

| **Enterprise Category** | **Headcount: Annual Work Unit (AWU)** | **Annual Turnover** |
| --- | --- | --- |
| Small | <50 | ≤ €10 million (£8.5 million)(in 1996 € 7 million) (£6 million) |

1. Supporting Documentation:

Suppliers will need to provide the following documentation to be registered as a new Vendor:

1. A certified\* copy of your bank account statement giving details of your address and bank account details.
2. Certified\* copy of cheque/paying-in slip
3. A certified\* copy of your debit card which shows new bank account details (only for Self-Employed)
4. *In exceptional circumstances only* any other independently verifiable information (eg website)

\* The copy should be certified by Council staff with supplier contract management responsibilities.

### Payment terms

The Standard Payment Terms are 30 calendar days from the receipt of a valid invoice from the supplier.

All Suppliers will default to 30 days Payment Terms unless agreed in contract.

Suppliers in the CIS scheme default to 28 days

In the event that a supplementary overriding contract exists between the supplier and the Council, please state the payment terms under this contract.

## Part 2: To be completed by the Council Officer initiating this request

| **1** | Have you checked on AGRESSO to confirm that the Supplier does not already exist? Yes [ ]  No [ ] If ‘Yes’ please answer 1a. If ‘No’ please go to 2. |
| --- | --- |
| **1a** | Please tick the correct box to confirm a check has been carried out. |
| Supplier Name | Supplier Postcode | Supplier Bank Account |
| [ ]  Yes [ ]  No  | [ ]  Yes [ ]  No  | [ ]  Yes [ ]  No  |
| **1b** | If no to any of 1a please specify (If you do not have access to AGRESSO please contact your Finance Officer) |  |
| **2** | Payment Terms (If not 30 days)(1) |  |
| **3** | Is this Supplier required to be added on Agresso?(2) | [ ]  Yes [ ]  No |
| **4** | Reason for New Vendor to be set up |  |
| **5** | “I confirm that this request to add this vendor onto the address book is genuine.”“I have checked the details against the supporting documents provided by the supplier.”(4) |
| NAME | SIGNATURE | DEPARTMENT | DATE |
|  |  |  |  |
| EMAIL |  |  |
|  |  |  |

## Part 2a: To be completed by the Address Book Authorised Signatory

| ADDRESS BOOK AUTHORISED SIGNATORY USE(3) |
| --- |
| “I confirm that I am satisfied that sufficient evidence (as laid down in the guidance notes and the financial regulations) has been obtained to enable this vendor’s details to be added to the address book. Furthermore, I confirm that I am authorised to approve this request.” |
| NAME | SIGNATURE | DEPARTMENT | DATE |
|  |  |  |  |
| DESIGNATION | EXTENSION | EMAIL |
|  |  |  |

## Guidance Notes (Part 2 & 2a)

1. The Standard Payment Terms are 30 calendar days from the receipt of a valid invoice from the supplier.

All Suppliers will default to 30 days Payment Terms unless agreed in contract.

Suppliers in the CIS scheme default to 28 days

In the event that a supplementary overriding contract exists between the supplier and the Council, please state the payment terms under this contract.

1. If you require the supplier to be added onto Agresso, then they will need to provide an email address for order to be sent to (required in field 10 & 11 in Part 1 of the form).
2. Only officers whose names appear on the Address Book Authorised Signatory Listing can approve the form. Details of officers authorised to approve requests within your department can be obtained by contacting Serco Banking & Control on 0151 906 7490/0151 906 7795.
3. To confirm the details provided in Part 1 of the form (and therefore authorise this form) you should verify the answers against the details supplied in the supporting documentation.

Suppliers may provide any of the following documentation in support of their request to be set up as a new supplier on the Vendors Address Book:-

1. A certified\* copy of the bank statement giving details of their address and bank account details.
2. Certified\* copy of cheque/paying-in slip OR
3. A certified\* copy of their debit card. (Only for Self-Employed)
4. *In exceptional circumstances only* any other independently verifiable information (eg website showing bank details). The Council officer to state how the evidence was independently obtained and verified.

**\*** The copy should be certified by the council officer who initiated the request.

***The certifier only needs to sign (and date) to confirm that the documents were received / obtained from a legitimate source.***

1. Send **only authorised and completed** forms by email to: Suppliersetup@westminster.gov.uk