



## ***SUPPLIER DATA FORM (CONFIDENTIAL)***

FINANCE DIVISION

EMAIL: [purchasing@flemingcollege.ca](mailto:purchasing@flemingcollege.ca)

New Supplier

Update Existing Supplier

- COMPLETE THE FORM IN IT'S ENTIRETY AND RETURN ONLY TO PROVIDED SECURE EMAIL ADDRESS ABOVE
- FAILURE TO PROVIDE COMPLETE INFORMATION MAY RESULT IN DISQUALIFICATION AS A COLLEGE SUPPLIER

College Employee Requesting New Supplier Setup:

### **SECTION A – BUSINESS DETAILS**

#### **COMPANY INFORMATION**

**Registered** Business Name:

**Full** Address:

Telephone #:

Email Address:

Website:

HST / BIN #:

SIN # (only provide if you don't have an HST/BIN #):

Number of years in Business:

Type of Goods and/or Services offered:

#### **ORDERING INFORMATION**

Contact Name for Ordering:

Ordering Email Address:

Ordering Telephone #:

#### **REMITTANCE INFORMATION (IF DIFFERENT FROM ABOVE)**

Company Name:

Company Address:

Company Email Address:

Company Telephone #:

#### **EXECUTIVE OFFICER OF YOUR COMPANY (President, CEO, or Owner)**

Name:

Title:

Address:

Telephone:

Email:



**SECTION B – CONFLICT OF INTEREST**

**CONFLICT OF INTEREST ACKNOWLEDGEMENT**

I confirm that to the best of my knowledge and belief, no actual or potential conflict of interest exists with respect to my dealings with the College.

Potential Conflict of Interest exists.

If Yes, provide details:

**SECTION C - PAYMENT INFORMATION**

**SUPPLIERS with CANADIAN EFT / DIRECT DEPOSIT: THIS FORM WILL NOT BE PROCESSED WITHOUT A COPY OF A VOID CHEQUE OR A BANK LETTER**

Name of Financial Institution	Bank #	Branch #	Account #
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**INTERNATIONAL SUPPLIERS – WIRE TRANSFER IS THE STANDARD PAYMENT METHOD**

Bank Name	Bank Address	Account # or IBAN	Swift Code
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Intermediary Banking (if applicable)

Intermediary Bank Name	Bank Address	Account # or IBAN	Swift Code
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**SECTION D – AUTHORIZATION**

I certify that all of the foregoing information is true

Name:

Title:

Date:

Signature:

**SECTION E – TERMS AND CONDITIONS**

This information will be used to pay amounts owing by Fleming College to your organization by direct deposit or wire transfer to the bank account identified. The email address provided will be used to send remittance advice of the payments. It is advisable to use a secured generic email that will not be affected by the change of staff in your organization.

Notice of changes to this information must be made to Fleming College using this form. We require 30 days’ notice to process changes. Note that you are responsible for any errors in the information provided and for any failure or delay in notification of change. Any loss of payment, once the deposit has been received by your bank will be borne by you. Any duplicate payment, overpayment, fraudulent payment or payment made in error will be promptly returned to Fleming College.

The personal information on this form is collected under the authority of the Ministry of College and Universities Act R.S.O. 1990, cM.19, s.5. In accordance with the Freedom of Information and Protection of Privacy Act, it will be used for the purpose of administering financial transactions and reporting and other legally authorized administrative purposes within the college, including vendor mailing lists. If you have questions regarding the collection/ use/retention of this information, please contact the Purchasing Department at Fleming College.