

Requestor		Contact Phone		
Position *		Date Submitted		
Business Unit		Form Reference		
Complete and submit this form to create a new vendor or change the details for an existing vendor. For assistance with completing this form, click on Help				
To be completed by requestor		100		
Request Type *	Create			
Reason for Create/Change				
Vendor Number #			?	
If you are changing a vendor's detail	s, only the fields highlighted in blue can	be edited.		
Vendor Account Group *				
Old Vendor Code / Legacy System Vendor Reference Number	n			
Customer number		?		
Trading Partner		?		
Expand All Collapse All				
⊠ Vendor Name				
Title				
Vendor Name Line1 *				
Vendor Name Line 2				
Vendor Name Line 3				
Vendor Name Line 4				
Search Vendor By *				



Address Details				
House/Building Number				
Street/Address Line 1 *				
Address Line 2				
Address Line 3				
Country *	Australia			
Suburb/City *				?
State *				
Postcode *				?
PO Box				
PO Box Postcode				
PO Box Country	Australia			
PO Box State				
PO Box City				?
Vendor Language *	English			
▼ Contact Details	1,535			
	Contact 1	Contact 2	Contact 1	Contact 2
Telephone Number				
Mobile Phone				
Fax Number				
Email Address *				
Standard Comm.mtd				



▼ Vendor Contact Person				
	Contact 1	Contact 2	Contact 1	Contact 2
First Name				
Surname				
Telephone Number				
Email Address				
Fax Number	:N			
▼ Vendor Bank Details				
Add/Change Bank Details:				
New Entry Copy	Delete			
Bank Country BSB	Bank Account No	Bank Name/Bra	anch	Name of Account Holder
Australia				
∨ Vendor Accounting Information	on			
ABN				
Print-Recipient Created Tax Invoice	⊂ No	○ Yes		○ No ○ Yes
Registered For GST *	○ No	(Yes		○ No ○ Yes
Reconciliation Account *	7			?
Cash Management Group *				4
Vendor Order Currency *	AUD			
Payment Method *	Cheque	ů.	C	Cheque
	C Electronic	Funds Transfer		Electronic Funds Transfer
Payment Terms *				?
INCO Terms				?
Port of shipment/Port of destination				
Alternative Payee		•		?



Withholding Tax		
Withholding tax type *		?
Withholding tax code *		
Exemption Reason		?
Exemption certificate number		
Exemption from		
Exemption to		
Effective Withholding rate (%)		
Exemption rate (%)		
Comments - may be entered by the	he Requestor, Approver(s) or any other	r form processor
Previous Comments		
New Comments		
Save as draft		