## I/3 New Vendor Form - Designated Agencies only

## I ran Data Warehouse report FR053-All Vendor Codes for a TIN, to confirm the vendor isn't set up yet. Certify:

- If the vendor's TIN already exists on FR053, and the vendor address is listed on FR053, do not submit this form. Instead, use the existing vendor code to process your payment document(s).
- If the vendor's TIN already exists on FR053, and ALL addresses are still being used, and if a new payment address is needed, submit a *I/3 New Location Form*, with a copy of an invoice or a W-9 from the vendor.
- If the vendor's TIN already exists on FR053, and if the vendor's payment address needs to be changed (ie. vendor has moved), do not submit this form. Instead, submit a 1/3 Vendor Modification Form.

	SSN		IN	_
	OF	R		
Vendor Information				
Legal Name:				
Alias/DBA:				
1099 Classification:				
Payment Address Information				
Optional Routing Information: (if a	ipplicable)			
Payment Street Address:				
Payment City, State, Zip:				
Ordering Address Information		(Skip th	s section if ide	entical to Payment addres
Optional Routing Information: (if a	ipplicable)			
Ordering Street Address:				
Ordering City, State, Zip:				
1099 Address Information	(Skip if ider	tical to Payment	address. Inclu	de explanation if differer
1099 Street Address:				<u> </u>
1099 City, State, Zip:				
Explanation or Agency confirmation f	rom vendor			
that the 1099 address is different tha	n payment:			
that the 1099 address is different tha Requestor Information	n payment:			
	n payment:			
Requestor Information	n payment:			
Requestor Information Requestor Name:	n payment:			
Requestor Information Requestor Name: Requestor Agency Number:	n payment:			
Requestor Information  Requestor Name:  Requestor Agency Number:  Requestor Phone:  Requestor Email Address:  Additional Information to provide that				
Requestor Information Requestor Name: Requestor Agency Number: Requestor Phone: Requestor Email Address:				
Requestor Information  Requestor Name:  Requestor Agency Number:  Requestor Phone:  Requestor Email Address:  Additional Information to provide that	at may be	ASVendorHelp@	owa.gov	
Requestor Information Requestor Name: Requestor Agency Number: Requestor Phone: Requestor Email Address: Additional Information to provide the helpful for vendor setup:	at may be  documentation to: D		owa.gov	
Requestor Information  Requestor Name:  Requestor Agency Number:  Requestor Phone:  Requestor Email Address:  Additional Information to provide the helpful for vendor setup:  Email this certified form with requested	at may be  documentation to: Dec., Hoover Bldg, Attn. Dec.	AS Vendor Help	owa.gov	

FR053/FR057 review:

Vendor No. updated:

Address ID

**Location Name:** I/3 Document ID No.