



TURKS AND CAICOS ISLANDS GOVERNMENT (TCIG)

VENDOR ADDITION/ CHANGE FORM

AUTHORIZATION TO ADD OR AMEND VENDOR RECORDS

To the Accountant General: Please make the undermentioned addition / change to Vendor Details in SmartStream

Requesting Department: _____ Date: _____

Site: _____

VENDOR INFORMATION:

Vendor Status: (check one) New Addition Amendment Purchase Order

Vendor ID: _____

Vendor Operating Name: _____

Vendor Legal Name: _____

Business Registration/License Certificate _____

CONTACT INFORMATION:

Contact Name: _____ Phone: () _____

Contact Title: _____ Fax: () _____

Email: _____

VENDOR LOCATION:

Business Address: _____

VENDOR BANK DETAILS (For vendors with Turks & Caicos bank accounts only)

Bank Name: _____ Account Number: _____

Account Name: _____

Signed

Head of Department

Date

FOR TREASURY USE (ACCOUNTS PAYABLE UNIT)

Vendor Assigned ID: _____ Date: _____

Name: _____ Signature: _____