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| --- |
| SGA Cobblestone vendor profile |
|  |  |
| vendor company name:**{---Vendor Company Name---}**Active:{---Active---}referral source:{---Referral Source---}Registration Fee:{---Registration Fee---} | DBA (Doing business As):{---DBA (Doing Business As)---}Vendor Application status:{---Vendor Application Status---}Vendor Type:Non-GamingExpiration Date:{---Expiration Date---} |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Infinium #  | Company ID #  | Unifier #  |  |
| {---Infinium Number---} | {---Company ID---} | {---Unifier Number---} |

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| **Vendor’s Address** |
| **STREET 1** | **STREET 2**  | **CITY**  |
| {---Street---} | {---Street 2nd Line---} | {---City---} |

|  |  |  |
| --- | --- | --- |
| **STATE/PROVINCE** | **POSTAL CODE** | **COUNTRY** |
| {---State/Province---} | {---Postal Code---} | {---Country---} |

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| --- |
| **Contact Information** |
| **NAME OF MAIN CONTACT** | **MAIN CONTACT EMAIL** | **MAIN CONTACT PHONE** |
| {---Name of Main Contact Person---} | {---Contact Email Address---} | {---Telephone Number(s)---} |

|  |  |  |
| --- | --- | --- |
| **AUTHORIZED SIGNER NAME** | **AUTHORIZED SIGNER TITLE** | **AUTHORIZED SIGNER EMAIL** |
| {---Authorized Signer Name---} | {---Authorized Signer Title---} | {---Authorized Signer Email---} |

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| **Tax Information** |
| **TAX ID # (FEIN/TIN/VAT/SSN)** | **DATE ON W9/W8** | **TAX CATEGORY** |
| {---Tax ID Num (FEIN / TIN / VAT / SSN)---} | {---Date on W9 or W8---} | {---What is your Tax Category?---} |

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| **Vendor’s Information** |
| **CATEGORY CODE** | **VENDOR CLASSIFICATION** | **TA IATA** |
| {---Category Code---} | {---Vendor Classification---} | {---TA IATA Num---} |

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| **PRODUCTS OR SERVICES RENDERED** |
| {---Brief Description of Products or Services Rendered---} |

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| **Vendor’s Payment Information** |
| **FINANCE CONTACT NAME** | **FINANCE CONTACT EMAIL** | **FINANCE CONTACT PHONE** |
| {---Finance Contact Name---} | {---Finance Contact Email---} | {---Finance Contact Phone---} |

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| --- | --- | --- |
| **METHOD OF PAYMENT** | **ACH FORM VERIFIED** | **PAYMENT TERMS** |
| {---Method Of Payment---} | {---ACH Form Verified---} | {---Payment Terms---} |

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| **REMITTANCE CONTACT** |
| {---Remittance Contact Name and Email---} |
| **REMITTANCE STREET 1** | **REMITTANCE STREET 2** | **REMITTANCE CITY** |
| {---Remittance Address 1---} | {---Remittance Address 2---} | {---Remittance City---} |
| **REMITTANCE STATE/PROVINCE** | **REMITTANCE POSTAL CODE** |  |
| {---Remittance State/Province---} | {---Remittance Zip Code---} |  |

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| **Vendor Company Demographics** |
| **WOMEN OWNED ENTERPRISE** | **VETERAN OWN ENTERPRISE** | **MINORITY OWNED ENTERPRISE** |
| {---Women Owned Enterprise---} | {---Veteran Owned Enterprise---} | {---Minority Owned Enterprise---} |

|  |  |  |
| --- | --- | --- |
| **SMALL BUSINESS** | **LOCAL BUSINESS** | **ADA DISABILITY** |
| {---Small Business---} | {---Local Business---} | {---ADA Disability---} |