



PEOPLESOFT VENDOR ADD FORM

Requester's Name: _____ Request Date: _____

Vendor Name: _____

Hawaii Tax ID if applicable: _____

Main Address: _____

Mailing address (if different): _____

Remittance address (if different): _____

Contact person: _____

Phone #: _____ Fax #: _____ Other: _____

E-mail address: _____ Payment net term: _____

Additional information: _____

*W-9 form is required; please attach the W-9 form to this request.

For Purchasing Office use only:

Vendor ID#: _____

Job completed by: _____

Date: _____