

STEUBEN COUNTY – FINANCE DEPARTMENT – Vendor Add/Change Form

COUNTY OFFICE BLDG, ROOM 301. 3 EAST PULTENEY SQUARE – BATH, NEW YORK 14810

PHONE: Vendor Questions: (607) 664-2405 FAX: (607) 664-2188

The information below, that we are requesting, is required for us to process any payments to you.
Please return this form within **15 days** to AVOID DELAY IN PAYMENT or BACKUP WITHHOLDING.

W-9 –TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION - PLEASE TYPE OR PRINT CLEARLY

Name (as shown on your income tax return) _____

Business Name (if different from above) _____

Check appropriate box: Individual/Sole Proprietor Corporation Partnership

OR LLC (Limited Liability Company): Individual/Sole Proprietor Corporation Partnership

Taxpayer Identification Number (TIN): Enter your TIN in the appropriate box. The TIN provided must match the name given to avoid backup withholding. For individuals, this is your social security number. For other entities this is your employer identification number. See W-9 instructions for more information.

Social Security Number - - - - - Employer Identification Number - - - - -

Certification:

Under penalties of perjury, I certify that: 1) I am not subject to backup withholding; 2) The number shown on this form is my correct Federal Identification Number; 3) The information I have supplied is correct; and 4).that I am a US citizen.

Signature _____ **Date** _____

WARNING: PURSUANT TO SECTION 175.35 OF THE PENAL LAW, A PERSON WHO INTENDS TO DEFRAUD THE STATE OR ANY POLITICAL SUBDIVISION THEREOF BY OFFERING OR PRESENTING A WRITTEN INSTRUMENT WHICH HE OR SHE KNOWS CONTAINS A FALSE STATEMENT OR FALSE INFORMATION TO PUBLIC OFFICE WILL BE FILED WITH, REGISTERED OR RECORDED IN OR OTHERWISE BECOME A PART OF THE RECORDS OF SUCH PUBLIC OFFICE OR PUBLIC SERVANT, IS GUILTY OF OF CLASS "E" FELONY CARRYING A POSSIBLE SENTENCE OF 4 YEARS IN PRISON, A \$5,000 FINE, OR BOTH.

PURCHASING ADDRESS

PAY TO ADDRESS (if different)

Address #1 _____

Address #2 _____

City, State, Zip _____

Contact Person _____

Phone Number _____

COUNTY USE: Requested by: _____ Dept: _____ Extension: _____

Primary 1099 Code: _____ **N** (No 1099), **E** (Non-Employee), **M** (Medical), **R** (Rent), **L** (Legal)

NOTES:

FINANCE DEPARTMENT
COUNTY OF STEUBEN

PATRICK F. DONNELLY
COMMISSIONER OF FINANCE



TAMMY HURD-HARVEY
DEPUTY COMMISSIONER
OF FINANCE

COUNTY OFFICE BUILDING, ROOM 301
3 EAST PULTENEY SQUARE
BATH, NEW YORK 14810-1577
(607) 664-2488
(607) 664-2188 (Fax)

VENDOR NAME _____ **VENDOR #** _____

Steuben County makes payments to vendors via a Visa Commercial Card

How it works:

Upon enrolling, you will receive an automated remittance email for each payment. These emails will contain a link to a secure web portal where you will obtain a unique Visa credit card account number, the amount to charge and the other pertinent details of the transaction needed to process and reconcile your payments. The credit card account will change with each payment so you will not need to keep this information on file.

To Enroll:

To enroll in this new payment arrangement, please have an authorized company representative complete the below fields for each appropriate remittance address and return to the Steuben County Finance Office at the above address or fax to 607-664-2188:

Company Name:	
Remittance Address:	
City:	
State:	
Zip Code:	
Contact Name:	
Contact Title:	
Contact Phone:	
Remittance E-mail*:	
CVV2 Required:	Yes <input type="checkbox"/> No <input type="checkbox"/> (3 number code that is usually on back of card)

If your company is unable to accept payment by credit card, please complete the information below to receive payment via an electronic funds transfer (EFT) directly into your bank account.

Bank Name	
Bank Routing Number	
Bank Account Number	<input type="checkbox"/> checking <input type="checkbox"/> savings
Remittance E-mail*	

Signature of Authorized Representative

Date

Please call 607-664-2405 should you have any questions. Thank you.

*This is either a Receivable Department email or the person designated to process payments.