



City of Oakwood NEW VENDOR INFORMATION REQUEST

Vendor Number: _____
This area is for office use only.

Please fill out all information that applies to you or your business.
Return the completed form to the person you are working with at the City of Oakwood or send completed form and W-9 to accountspayable@oakwoodohio.gov to be added to our vendor listing.

Ordering Address/Information

Company/Individual Name _____ DBA Name _____
(As shown on Income Tax Return) (If applicable)
Address _____ City _____ State _____ Zip _____
Phone No. _____ Fax No. _____ Email address _____

Remit to Address (If different from above)

Address _____ City _____ State _____ Zip _____

Accounts Payable Contact

Name _____
Phone No. _____
Email address _____

Payment Information - Payments issued by the City of Oakwood are via Corpay, a third party A/P Automation service. The vendor is responsible for setting up payment details in Corpay.

Commodities or Services you are interested in supplying:

Merchandise - List Type of Merchandise

Services - List Type of Services

Does any owner, officer, employee, or shareholder of this company have any known relationship with the City of Oakwood, its employees or any members of their families?

Yes _____ No - If yes, explain: _____

I certify that:

I am, or this business is, legally authorized to do business in the State of Ohio.
I understand that the City of Oakwood does not accept any vendor processing fees.
I understand that the City of Oakwood is a tax-exempt political subdivision of the State of Ohio.

Certification - Sign and Date New Vendor Information Request

Printed Name & Title: _____

Signature: _____ Date: _____
(Print & Sign (Signature required)) (MM/DD/YYYY)

City/Equipment Request: _____
NAME Fax or email