



NEW BUSINESS VENDOR INFORMATION FORM

The Fort Worth Transportation Authority, dba Trinity Metro, looks forward to working with your organization. Complete this Vendor Form and email to VendorData@rideTM.org or mail form to Trinity Metro, Attn: Procurement Assistant - Procurement Department, 801 Grove Street, Fort Worth, TX 76102. Please include your company's latest W9 and current Certificate of Insurance. If you have questions, please contact Sonja Shorters at 817.215.8700. The information you provide is for internal purposes only.

A. Business Name:

Legal Business Name: _____

Registered DBA, if different from above: _____

Federal ID: _____

B. Ordering Information:

Mailing Address*: _____

City/State/Zip: _____

Contact: _____

Phone: _____ Fax: _____

Email Address: _____

Net Terms: _____

C. Payment Information:

Table with 5 columns: Payment Type (select one), ACH, Check, Credit Card, Wire. Rows include Billing Address*, City/State/Zip, Remittance Contact, Phone, Fax, and Remittance Email Address.



D. Contact Information:

Contact 1		Contact 2	
Name:		Name:	
Title:		Title:	
Email:		Email:	
Phone:		Phone:	

E. Preferred method of receiving purchase orders (required, select one only):

E-mail Fax

F. Supplier Diversity Classification:

Select all classifications that apply to your business, if applicable:

Certificate	Certificate Number	Certifying Agency
DBE		North Central Texas Regional Certification Agency
MBE		Texas Unified Certification Program
WBE		D/FW Minority Supplier Development Council
SBE		Women’s Business Council Southwest
Other		State of Texas
Non		Other

Business Owner’s Ethnicity:

- Asian Indian
- Asian Pacific
- African American/Black
- Hispanic/Latino
- Native American
- Caucasian

Business Owner’s Gender:

- Male
- Female
- Other



G. Classification of goods and/or services provided:

Reference the attached list to select the 3-digit commodity codes that best describe the good(s) or service(s) that your company provides.

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

***OFFICE USE ONLY:**

Note: If address in "Ordering Information" and "Payment Information" sections are different, create a Vendor Remit account in addition to the primary Vendor account.

JDE Supplier#:		JDE Supplier VR #:	
Vendor Setup Approved By:		Date:	
Entered in JDE By:		Date:	