



PURCHASING DEPARTMENT

Academic Complex Wing D D-116
505 Ramapo Valley Road, Mahwah, NJ 07430-1680
Phone: 201.684.7496 Fax: 201.684.7926
e-mail: purchase@ramapo.edu

SUBSTITUTE W-9, SUPPLIER INFORMATION and SUPPLIER CHANGE FORM

Use this form to request a vendor be created in Banner or for any changes to an existing vendor ID.

Instructions: Please complete and return to the address above. Individuals: Please complete Parts 1 & 2.
Businesses: Please complete Parts 1 to 5. Completion of Part 4 is optional. Changes to an existing ID: Enter the ID and only the data to be changed.

RCNJ Requestor: \_\_\_\_\_ Date: \_\_\_\_\_

Part 1 Name, Address and Tax Identification Number
Existing Banner ID: R \_\_\_\_\_
Legal Name: \_\_\_\_\_ Trade Name (DBA): \_\_\_\_\_
Mail Purchase Orders & Bids to: \_\_\_\_\_ Mail Payments To: \_\_\_\_\_
Telephone Number (\_\_\_\_) \_\_\_\_\_ Fax Number: (\_\_\_\_) \_\_\_\_\_
Check Appropriate Box: Individual [ ] Corporation [ ] Partnership [ ] Nonprofit [ ] Government Entity [ ]
Taxpayer Identification Number \_\_\_\_\_ - \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_
Employer Identification Number (EIN) \_\_\_\_\_ - \_\_\_\_\_

Part 2 Certification
Under penalties of perjury, I certify that: The number(s) shown on this form is my correct taxpayer identification number(s) (or I am waiting for a number to be issued to me), and (2) The organization entity and all other information provided is accurate, and (3) I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding. You must cross out item (3) above if you have notified by IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return.
Authorized Signature \_\_\_\_\_ Title \_\_\_\_\_
Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Individuals STOP here. Businesses please CONTINUE

Part 3 Business Enterprise Size and Commodity / Service Category Please check ALL that apply
Large Business [ ] Small Business <\$500,000 [ ] <\$12 Million [ ] Construction <\$1million [ ] Construction >\$1million [ ]
Certifications:
NJ Commerce [ ] NJDOT [ ] NJ Transit [ ] SBA [ ] State of NJ Self Certification [ ] None [ ]
Please List the commodities and/or services provided: \_\_\_\_\_



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Part 4 (Optional) Business Enterprise Category, Ethnicity and Ownership

Provision of the information in Part 4 is strictly voluntary. Contracting and purchasing decisions made by Ramapo College will not be influenced by whether a business chooses to respond or not. Please check ALL that apply:

Business Enterprise Category: Minority Owned [ ] Woman Owned [ ] Veteran [ ] Other [ ]
Ethnicity: African American [ ] Asian American [ ] Caucasian American [ ] Hispanic American [ ] Native American [ ]

Please complete for each business owner with a 10% or greater share:

Table with 2 columns: Owner's Name, Percent Ownership. Includes four rows of blank lines for data entry.

Part 5 Business Certification

Business Name from Part 1
Information Furnished by (Please Print): Title
Signature: Date: