



# Vendor Registration Form

**FN10\_F13**

Revision: 9

Last Revision Date: OCTOBER 2017

Next Revision Date: DECEMBER 2018

Approver: FIN CONTROLLER

SME: FIN A/C M

PLEASE COMPLETE SECTIONS 1, 2, 3, 4 AND 5 BELOW

PRINT, SIGN, SCAN AND RETURN THIS FORM TO: [Procurement@sunwater.com.au](mailto:Procurement@sunwater.com.au)

*The Vendor agrees to maintain all insurances listed below and advise SunWater of any changes*

**1. VENDOR DETAILS**

Contact Name of SunWater Representative: \_\_\_\_\_

Vendor Type: New  Returning

Legal Entity Name: \_\_\_\_\_

Business Address: \_\_\_\_\_ Post Code \_\_\_\_\_

PO Box: \_\_\_\_\_ Post Code \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_ ABN: \_\_\_\_\_

Contact Position: \_\_\_\_\_ ACN: \_\_\_\_\_

Contact E-mail: \_\_\_\_\_ E-mail (Sales): \_\_\_\_\_

E-mail (Accounts Receivable): \_\_\_\_\_

**2. PAYMENT DETAILS  
(PAYMENT TERMS – 30 DAYS AFTER RECEIPT OF A CORRECTLY RENDERED INVOICE)**

Payment Method: EFT  Cheque  Payee: \_\_\_\_\_

Account Number: \_\_\_\_\_ BSB: \_\_\_\_\_

Account Name: \_\_\_\_\_ Bank Name: \_\_\_\_\_

Our Finance team may be in contact to independently verify bank account details.

Please provide one of the following as verification of your nominated bank details.

Bank Account Documentation Attached: Bank Deposit Slip  Bank Statement  Business Cheque

**3. INSURANCES  
(PLEASE INDICATE ALL INSURANCES APPLICABLE TO YOUR BUSINESS)**

<b>Public Liability</b>	Cover per Claim: _____	Policy Number: _____	Expiry Date: _____
<b>Professional Indemnity</b>	Cover per Claim: _____	Policy Number: _____	Expiry Date: _____
<b>Motor Vehicle</b>	Cover per Claim: _____	Policy Number: _____	Expiry Date: _____
<b>Works Insurance</b>	Cover per Claim: _____	Policy Number: _____	Expiry Date: _____
<b>Workers Compensation</b>	Cover per Claim: _____	Policy Number: _____	Expiry Date: _____
<b>Personal Injury</b> applicable to Sole Trader only	Cover per Claim: _____	Policy Number: _____	Expiry Date: _____

**NOTE:** Please provide with this form copies of your insurance certificates of currency.



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## 4. SERVICES/GOODS PROVIDED

Describe the services/goods provided by your business to which the above insurances apply

## 5. VENDOR AUTHORISATION

I hereby declare that I am authorised to sign this Vendor Registration Form on behalf of the company and I guarantee that all provided information is correct.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### SUNWATER USE ONLY

Request Type: New  Change  Block  Unblock  Delete  Tax Code  W1 = 0%  
W2 = 48.5%  
W3 = 5% (O/S)

Reason for change if Block, Unblock or Delete

\_\_\_\_\_

Account Group: EXTN (External Supplier)  GOVT (Qld Government)

Vendor Number: \_\_\_\_\_ Trading Partner: \_\_\_\_\_ Standard is PNF219  
Check list if Qld Government

Requesting Officer: Name \_\_\_\_\_ Designation \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Vendor Creator: Name \_\_\_\_\_ Designation \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Checked by: Init. \_\_\_\_\_ Date \_\_\_\_\_

## PRIVACY COLLECTION STATEMENT

SunWater collects and uses your personal information to provide services and information to its customers, for its business operations and to comply with the law. Our Privacy Policy (available at [www.sunwater.com.au/home/privacy](http://www.sunwater.com.au/home/privacy)) (which includes our Credit Reporting Policy) tells you how we usually collect, use and disclose your personal information, credit information and credit eligibility information and how you can ask for access to it or seek correction of it. Our Privacy Policy also contains information about how you can make a complaint and how we will deal with such a complaint.

If you would like further information about our privacy policies or practices, please contact our Privacy Contact Officer using the contact details below.

SunWater  
Information Services  
Level 10, 179 Turbot Street Brisbane Queensland 4000  
PO Box 15536 City East Queensland 4002  
Phone: +61 7 3120 0000  
Fax: +61 7 3120 0260  
E-mail: [IMPrivacyRequests@sunwater.com.au](mailto:IMPrivacyRequests@sunwater.com.au)