GLWA Great Lakes Water Authority	GLWA Procurement			
	Effective Date: 7/1/2024	**Document #:** FSA_PRO_SUP_0001	**Revision Date:** 8/17/2026	**Revision#:** 2
Document Title: Vendor Registration Form			**Document Owner/Department:** Procurement Team	

General Information				
Vendor Legal Name:		☐ New ☐ Change ☐ Add New Site		
Trade Name (Doing Business As):		Vendor Code:		
Provider of: ☐ Goods ☐ Services ☐ Goods/Services *If Services, type of service provided*:				
Type of Organization (*check only one*)				
☐ Individual – US citizen or US permanent resident ("green card")				
☐ Individual – Non-US citizen or Non-US permanent resident ("foreign")				
☐ Sole Proprietorship	☐ Partnership (US)	☐ Corporation	☐ Government Agency	
Non-US Corporation: ☐ Partnership (US) ☐ Corporation ☐ Government Agency				
Referral Source:				
☐ DBE (MBE /VBE/WBE/DOBE/LGBTQ and or any other disadvantage group designation) ☐ SBE				
Attach a copy of your designation certification.				

Vendor Contact Information:					
Mail Payments to:		***Business Address: (if different from payment address)***			
Line 1:		Line 1:			
Line 2:		Line 2:			
City/State/Zip:		City/State/Zip:			
Country:		Country:			
Contact Information:					
Acct. Rec. - Name:		Phone:		Email:	
Customer Serv. - Name:		Phone:		Email:	
Sale/Other – Name:		Phone:		Email:	
URL (Web Address):					
Country of Permanent Resident *(for Non-US payees)*:					
Notes/Special Instructions:					
Vendor Authorization:					
Printed Name:		Title:	Phone:	Date:	
Signature:					

----------For Procurement Only----------				
☐ **Verified Vendor's Business Address**				
☐ **DUNS Check Completed** www.sso.dnb.com/app/.				
Procurement Authorization:				
Printed Name:		Title:	Date:	
Signature:				
Authorizer: I certify that I have reviewed this request, have found it in compliance with GLWA policies and procedures and hereby authorize this request. **Please note that the GLWA Vendor Registration Form must be completed electronically (not handwritten) for processing.**				