

## VENDOR SIGNUP FORM

### Vendor Information

Please provide this completed form and a copy of your IRS W-9 to the requestor of this document.

Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Remit to Address \_\_\_\_\_  
(if different from mailing address)

Place of Incorporation \_\_\_\_\_  
(State or Country, as applicable)

Sales Point of Contact \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Federal Tax ID \_\_\_\_\_ DUNS Number \_\_\_\_\_

Purchasing Point of Contact \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Federal Tax ID \_\_\_\_\_ DUNS Number \_\_\_\_\_

### Self Certification

Please check ALL Appropriate Boxes (Only the Vendor can provide certification).

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> L Large Business                      | <input type="checkbox"/> S3 Small Woman Owned Business               | <input type="checkbox"/> S6 National Ind. For the Blind See FAR 52.208-9               |
| <input type="checkbox"/> S1 Small Business (Not Disadvantaged) | <input type="checkbox"/> S4 HUB Zone Small Business See FAR 52.219-4 | <input type="checkbox"/> S7 NISH National Inst. For the Severely Disabled FAR 52.208-9 |
| <input type="checkbox"/> S2 Small Disadvantaged Business       | <input type="checkbox"/> S5 Veteran Owned Small Business             | <input type="checkbox"/> S8 Service Disabled Veteran Owned Small Business              |

### Payment Information

Standard terms are Net-30; anything else must be approved by Contemporary Product Solutions.  
If no terms are provided, standard terms apply.

Payment Terms \_\_\_\_\_ Note discount for Early Pay \_\_\_\_\_

### Payment Methods (Select One)

Check  Electronic (ACH)

Please note if the first payment should be made in an alternate method.

### If ACH, please provide the following:

ABA (Routing Number) \_\_\_\_\_

Account Number \_\_\_\_\_

### Export Compliance

Is the Company registered with the Directorate of Defense Trade Controls, U.S. Department of State?

Yes  In Process  No

Expiration Date \_\_\_\_\_ Application Date \_\_\_\_\_

Export POC (name and number): \_\_\_\_\_

Check all that Apply

Does not manufacture, export or temporarily import defense articles

Does not provide defense services

Other (provide explanation)

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Special notes to Contemporary Product Solution's Finance Department

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