



City of Dallas

# CITY CONTROLLER'S OFFICE VENDOR ADD /CHANGE FORM FOR COMPANIES AND INDIVIDUALS

To become a vendor with the City of Dallas, please complete all sections of the form below and submit it along with your company's current W-9 form to: [codvendorregistrations@dallas.gov](mailto:codvendorregistrations@dallas.gov).

Type of Request: <small>Chose One option</small>	<input type="checkbox"/> Add New Vendor <input type="checkbox"/> Update Existing Vendor (Current Vendor # _____) <input type="checkbox"/> Add Remit To Address
*Legal Name: (Line1 of W-9)	
DBA: (Line2 of W-9)	
Previous Name: (Updates only)	
*Checks Payable To:	

## Tax Identification Information

(Form will not be processed without this information; W-9 must be attached)

*Social Security Number				-									
OR													
*Federal Tax ID				-									

## General Information (Company Corporate Address)

*Address:													
City:													
State:					Zip Code					County			
*Telephone:					Fax								
Company Website:													
*Email Address:													

## Remit To Address

(Address where payments are mailed. For EFT (Electronic Funds Transfer), please **include** an email address for EFT notifications.

*Remit To Address:													
City:													
State:					Zip Code					County			
*Email Address:													

## Ordering Address (Address where purchase orders are received)

*Contact:				Title			*Telephone	
*Address:								
City:								
State:					Zip Code			County
*Email Address:								

## Accounts Receivable Contact Information

*Contact Name:				Title	
*Telephone:				Fax	
*Email Address:					

## Financial Information (Banking information for EFT Payments, include Bank Detail Letter or Voided Check)

*Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings												
*Bank Contact Name:											Title		
Bank Telephone:											Fax		
*Bank Email Address:													
*Bank Transit Routing #													(9 Digits)
*Bank Name:													
*Bank Account Number:													
Previous Account Number:													

**Important Notes:** The **signed and dated** W-9 form must accompany this registration.  
Incomplete submissions will delay processing.

**PLEASE ONLY COMPLETE AND SUBMIT IF THE INFORMATION HAS CHANGED.**

\*Complete form and email it to [CODVendorRegistrations@dallas.gov](mailto:CODVendorRegistrations@dallas.gov).

\*If the Company has been acquired or merged, complete the form and email along with the following:

☞ **W-9**

☞ **Current Insurance Certificate in compliance with contract specifications**

☞ **Purchase/Acquisition/Merger Agreement Documents**

☞ **State of TX Secretary of State Registration Documentation**

☞ **Assumed Name ("Doing Business As") Certificate**

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- Incomplete submissions will delay processing.