



VENDOR UPDATE REQUEST CHECKLIST

The following forms must be completed and submitted to the City of Moreno Valley Purchasing Division in order for a vendor to be added/updated in the New World system. If this is request is to process a refund payment, these forms are not necessary. If this vendor is a one-time payment vendor, ACH and voided check/bank authorization letter is not required. However, if a second payment is requested ACH and voided check/bank authorization letter will be required.

- Vendor Update Form
- Automated Clearing House (ACH) Vendor banking information Form
- Vendor W-9 Form
- Copy of voided check or bank authorization letter

Please send the signed and dated completed forms in one of the following manners:

Email a PDF copy to:

Or

Mail via US Postal Service to:

PURCHASINGDIVISION@MOVAL.ORG

City of Moreno Valley
Attn: Purchasing Division
P.O. Box 88005
Moreno Valley, CA 92552-0805

Send PDF of this form to purchasingdivision@moval.org

VENDOR UPDATE FORM

The following 3 documents must accompany a "Request for New Vendor" and "Request to update Vendor Record." Failure to provide this support will result in a delay in the vendor receiving payment or Vendor Maintenance.

- (1) **W-9 Form** (2) **ACH Form** (3) **Copy of voided check or bank authorization letter**

Please select one:

New Vendor Number: _____ (Internal Use Only)

NEW VENDOR INFORMATION

Vendor Name (as it appears on the W-9): _____

Vendor doing Business As (DBA): _____

Vendor EIN/Tax ID/SS#: _____

Mailing Address: _____

City/State/Zip: _____

Telephone: _____

ACH Notification Email : _____

ACH Contact Name: _____

Purchase Order Notification Email: _____

Vendor requires 1099?

Purchase Order Contact Name: _____

Yes No

UPDATING VENDOR INFORMATION

Previous Vendor Information		New Vendor Information	
Vendor Name:		Vendor Name:	
Vendor DBA:		Vendor DBA:	
Street Address:		Street Address:	
City/State/Zip:		City/State/Zip:	
Telephone:		Telephone:	
ACH Email:		ACH Email:	
ACH Contact Name:		ACH Contact Name:	
PO Email:		PO Email:	
PO Contact Name:		PO Contact Name:	

Requested By: _____

Signature: _____

Title: _____

Date: _____

ACH/ELECTRONIC PAYMENTS VENDOR REQUEST FORM

**This form is used to process or update a vendor file record to allow for ACH/Electronic payments.
A copy of a voided check and/or bank authorization letter must be included with this form.**

Section A: (To Be Completed By Vendor)

Vendor Name: _____

Vendor Contact Name: _____

Vendor Email: _____

Vendor EIN/Tax ID/SS#: _____

Bank Name: _____

Bank Street Address: _____

Bank City/State/Zip: _____

Bank Contact Name: _____

Bank Telephone: _____

Bank Account Number: _____

Account Type:

Routing Number: _____

Signature: _____

Date: _____

SECTION B: (To Be Completed by City of Moreno Valley Purchasing Division)

Vendor Number: _____

Date Request Received: _____

Comments:

Request Processed By: _____

Signature: _____

Date: _____

**Please send completed form in PDF format to purchasingdivision@moval.org
This form **must always be accompanied by** a vendor maintenance form (AR10)**