

New Supplier Registration (Individual)

IMPORTANT: This application is for DOMESTIC (U.S.) SUPPLIERS ONLY. International suppliers should not complete the application and must reach out to payroll-services@ufl.edu for assistance.

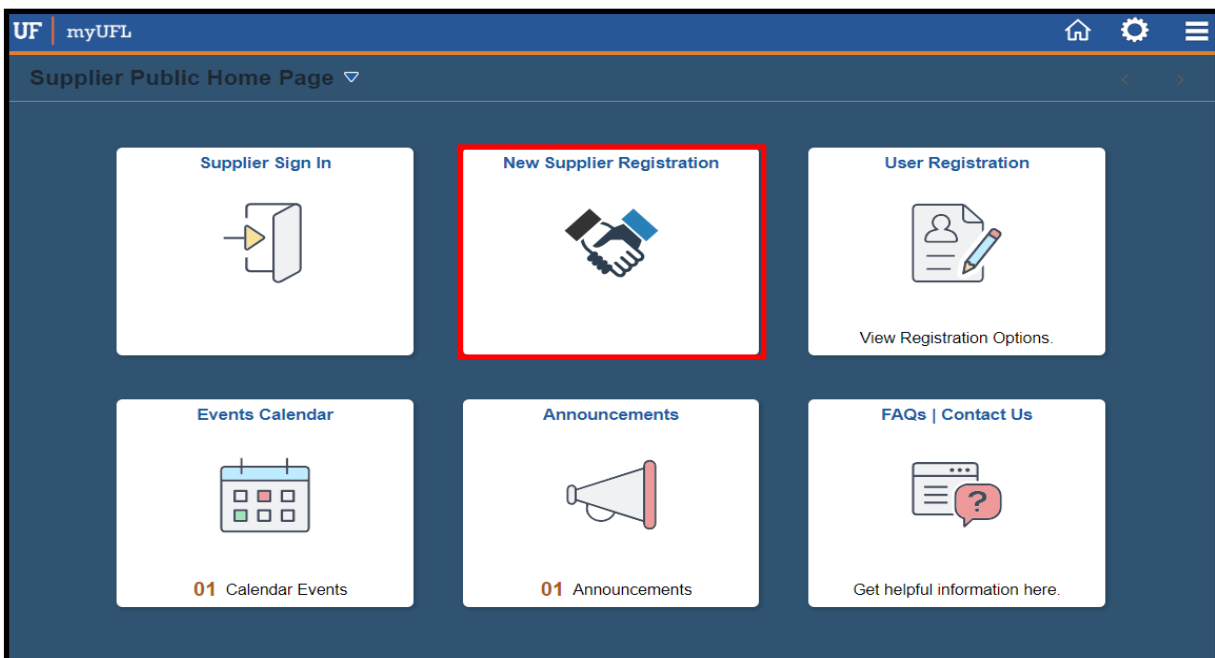
Welcome, new supplier!

Before you begin the registration process, please be sure to have the following documents available:

- 1) **Banking information**—provide ONE of the following:
 - Image of a voided check
 - Bank statement with your name, bank name, and account number (all other information may be redacted)
- 2) A completed [Supplier Tax Information Form](#).

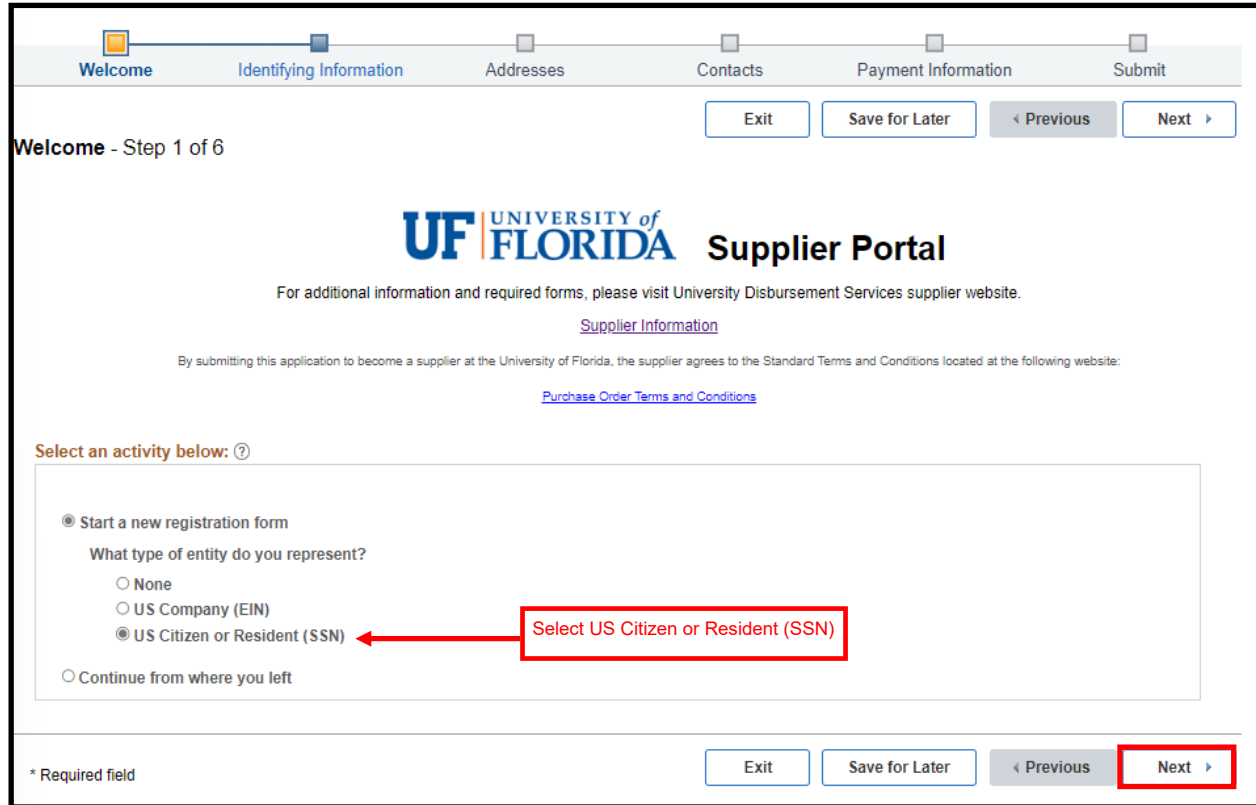
Please note: UF requires payment to suppliers via ACH or ePay.

To begin registration, navigate to the [UF Supplier Portal home page](#) and click the Supplier Portal Link. Select “New Supplier Registration.”



Ple

Step 1



Welcome - Step 1 of 6

UF UNIVERSITY of FLORIDA Supplier Portal

For additional information and required forms, please visit University Disbursement Services supplier website.

[Supplier Information](#)

By submitting this application to become a supplier at the University of Florida, the supplier agrees to the Standard Terms and Conditions located at the following website:

[Purchase Order Terms and Conditions](#)

Select an activity below: ?

☒ Start a new registration form

What type of entity do you represent?

☐ None

☐ US Company (EIN)

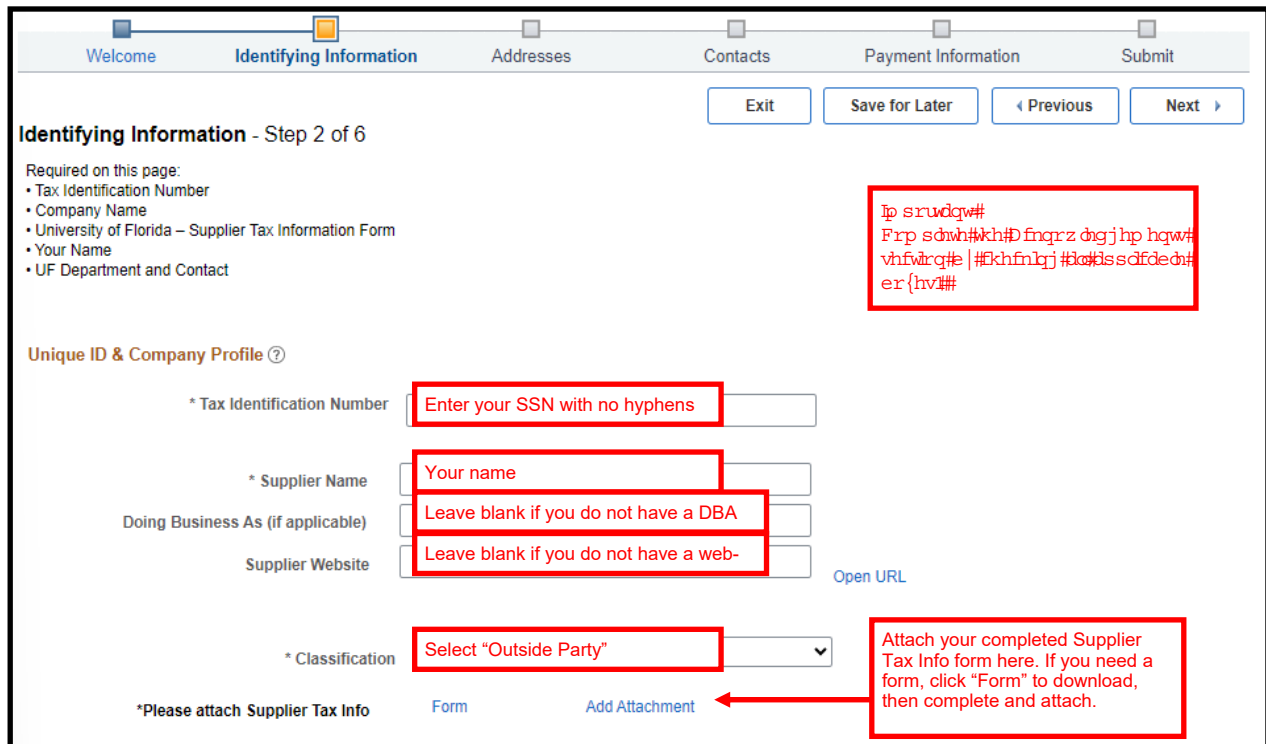
☒ US Citizen or Resident (SSN) Select US Citizen or Resident (SSN)

☐ Continue from where you left

* Required field

Exit Save for Later < Previous **Next >**

Step 2



Identifying Information - Step 2 of 6

Required on this page:

- Tax Identification Number
- Company Name
- University of Florida - Supplier Tax Information Form
- Your Name
- UF Department and Contact

Unique ID & Company Profile ?

* Tax Identification Number Enter your SSN with no hyphens

* Supplier Name Your name

Doing Business As (if applicable) Leave blank if you do not have a DBA

Supplier Website Leave blank if you do not have a web-

* Classification Select "Outside Party"

*Please attach Supplier Tax Info Form Add Attachment Open URL

Attach your completed Supplier Tax Info form here. If you need a form, click "Form" to download, then complete and attach.

Step 2 (continued)

Profile Questions ?

* Provide the ufl.edu email address of the UF department contact you are working with. (Address only please. No names.)

Enter your UF departmental contact's email address

* Conflict of Interest (COI) Information: Does any UF employee, or spouse, child, or relative* of a UF employee have an ownership interest of 5% or more in this

Select "No" in drop-down if NO UF employee has an ownership interest of 5%.
If "Yes" is selected, you must answer the three COI questions below.

COI 1A: (Answer ONLY if Yes to COI information above.) Please provide the name(s) of the UF employee(s) and a detailed explanation of the business this

COI 1B: (Answer ONLY if Yes to COI information above.) Does this entity intend to accept payment from a UF division, department or office affiliated with any

COI 1C: (Answer ONLY if Yes to COI information above.) Does any UF employee have direct or indirect involvement or any oversight whatsoever

UNSPSC ?

UNSPSC-United Nations Standard	Description
Add UNSPSC	
Add Additional Code	

Please note the UNSPSC entry is optional. UF departments may use the codes to locate suppliers who offer specific goods or services, so it is recommended that you add the UNSPSC code(s).

To select a UNSPSC, click the magnifying glass and a pop-up list should appear. Click "Look Up" for the list of codes and select the option that corresponds to the type of good or service you provide. You may select all that apply.

Comments ?

* Required field

Exit Save for Later < Previous **Next >**

Step 3

WelcomeIdentifying Information**Addresses**ContactsPayment InformationSubmit

ExitSave for LaterPreviousNext

Addresses - Step 3 of 6

Primary Address (W-9) ?

* CountryUSAUnited States

Address 1

Address 2

Address 3

City

State

Postal

Business PhoneExt

Enter your mailing address and phone number. You do not need to select any "Other Addresses" below.

Other Addresses ?

Check boxes below to indicate addresses that are different from your Primary Address above:

☐ Remit To Address

Address for remitting payment

☐ Sales Address

Address for sales

☐ Ordering Address

Address for sending orders

ExitSave for LaterPreviousNext

Step 4

WelcomeIdentifying InformationAddresses**Contacts**Payment InformationSubmit

ExitSave for LaterPreviousNext

Contacts - Step 4 of 6

Company Contacts ?

You have not added any contact information to your application. Choose "Add Contact" to add new contact information.

Add Contact

Select "Add Contact" to enter your contact information and user profile information.

* Required fieldExitSave for LaterPreviousNext

Step 4

Add Contacts

Contact Information ?

Description	<input type="text"/>	
* First Name	<input type="text"/>	<input type="checkbox"/> Primary Contact
* Last Name	<input type="text"/>	
Title	<input type="text"/>	
* Email ID	<input type="text"/>	
* Telephone	<input type="text"/>	Ext <input type="text"/>
Fax Number	<input type="text"/>	
Contact Type	<input type="text"/>	

User Profile Information ?

User Id must begin with "SUP" and be at least 11 characters.

* Requested User ID	<input type="text" value="SUP"/>
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Password should be at least 8 characters and include upper case, numbers and special chars.

* Password	<div>Choose your supplier User ID and password. The User ID must begin with SUP.</div> <div>Retain your User ID and password for future reference. You will use these to login to the Supplier Portal if you need to make changes or update your supplier information.</div> <div>You will also need to select a Password Hint and Hint Response.</div>
* Confirm Password	
Description	
* Password Hint	<input type="text"/>
* Hint Response	<input type="text"/>

OK

Cancel

Step 5

WelcomeIdentifying InformationAddressesContactsPayment InformationSubmit

ExitSave for LaterPreviousNext

Payment Information - Step 5 of 6

Attachments ?

*Requested Payment Terms30Net 30

Default is Net30. Do not change this

*Ordering Address

Use the drop-down menus and select your "Primary Address."

*Remit Address

Use the drop-down menus and select your "Primary Address."

☐ Enable Email Payment Advice

UF participates in Bank of America's ePayables program. Enrollment will allow UF to remit payments to you faster via single use credit cards. Please note that you must be able to accept credit card payment and there is a fee associated if you select this option.
If you would like to participate in the ePayables program, leave Payment Method and Banking Information blank and add a note in the comment box at the bottom letting us know of your choice.
For more information click here. [Link to Guide](#)

*Email Address

Enter your email address.

Payment Method

Select "Direct Deposit" from drop-down.

PO Dispatch Email

Enter your email address here.

PO Dispatch Fax

Leave blank if you do not have a fax num-

Supplier Banking Information ?

CountryUSAUnited States

Bank Name

Enter your bank's name.

Bank ID Qualifier001United States Bank

Account Type

Select account type from drop-down.

Bank Routing Number

Enter your routing number here.

Bank Account Number

Enter your bank account number here.

Attachments ?

[Add Attachment](#)

IMPORTANT! You must attach an image of a voided check OR a bank statement showing your name, bank name, and account number. All other information can be redacted.

Comments ?

Comments

*Required Field

ExitSave for LaterPreviousNext

Step 6

WelcomeIdentifying InformationAddressesContactsPayment InformationSubmit

ExitSave for LaterPreviousNext

Submit - Step 6 of 6

Select the "Review" button to review the registration information.

Click the "Submit" button to submit your registration after reviewing and accepting following Terms of Agreement .

If not shown below, please add your email along with the UF department contact's email address in the following format: your email address semicolon department contact: Example- potentialsupplier@gmail.com; departmentcontact@ufl.edu

This will send communication regarding this registration to you as well as the department contact you will be working with.

☐

Confirm your email address(es) are correct.

Terms and Conditions ?

Make sure you read terms of agreement fully before submitting your registration.

☒ Select to accept the Terms of Agreement below.
[Terms of Agreement](#)

Review

Submit

Exit

Save for Later

Previous

Next

Review the Terms of Agreement and click the box to accept.

Click "Submit" to submit your registration. The UF Supplier team will email you directly with any questions, if needed. Thank you for submitting your registration!