



Vendor Registration/Change Details Form

Use this form to **register as a supplier** of goods and services to Origis Energy or to **change your details**.

Vendor Details

Entity Name _____
Trading Name (if different) _____
Taxpayer ID# (TIN) _____
Are You Changing Existing Details or a New Supplier? New Supplier Change Existing Supplier

Address Information

Accounts Receivable Contact Name _____
Contact Email _____
Contact Address _____
Contact Phone Number _____ Fax Number _____
Payment Address _____

Payment Method | Please choose your preferred payment method

ACH Payment Information (Fee: \$0)
Account Name _____
Bank Name/Branch Location _____
Routing # (ABA #) _____ Account # _____

Wire Payment Information (Fee: \$25)
Account Name _____
Bank Name/Branch Location _____
Routing # (ABA #) _____ Account # _____

Check Payment Information (Fee: \$50)
Check Payable To _____
Address _____

Declaration | I declare I am authorized to provide the above information on behalf of the Vendor listed

Name _____ Date _____
Signature _____
Job Title/Position _____

Origis Energy AP Contact

Remit Invoices To AP@origisenergy.com
(786) 693-2624

Submit this Signed and Completed Form

Scan and Email To AP@origisenergy.com

Privacy: Any personal information provided by you on this form is being collected by Origis Energy for business, accounting and reporting purposes. It may be disclosed to other government agencies for those purposes. The information has been provided voluntarily. The information will be stored securely. You may access or correct your information by contacting Origis Energy at the contact information above.

Office Use Only

Entered By _____ Date _____
Concur Supplier # _____ Company Code _____