

University of Pennsylvania Supplier Questionnaire (revised May 2008)

In order to be added to the University of Pennsylvania Purchasing System Approved Supplier Database, prospective suppliers must provide all required information, agree to the University's Purchase Order Terms and Conditions, and submit the properly executed documents directly to Purchasing Services.

Purchasing Services reserves the right to decline a request to add a new supplier if, the commodity is already available from the University preferred contract or Penn Marketplace participating supplier, adding the supplier is not in the best interest of the University, or the supplier is listed in the U.S. Government Excluded Parties List System.

The "Doing Business with Penn" web site is (www.purchasing.upenn.edu/for_suppliers).

Section I: Supplier Profile Information

1.) Company Name: _____

2.) Business Address: _____

(Include Company's Street, City State & Zip Code – NO PO Boxes)

3.) Website URL: _____

4.) Phone#: _____ Fax #: _____

(Must be a dedicated fax line to receive faxed PO's)

5.) Company Product/Service: _____

6.) Sales Contact: Name: _____ Title: _____

E-Mail: _____

7.) e-Business Contact: Name: _____ Title: _____

E-Mail: _____

8.) Remit-To Address for Payment: (If Different than Line 2) _____

9.) Federal Tax Identification #: _____

10.) Is Your Company Listed on the US Government Excluded Parties List System? Yes (____) No (____)

Section II: Supplier Diversity Information

Purchasing Services is committed to socially responsible purchasing practices that support local community based and diversity owned businesses. We appreciate your assistance by indicating your diversity and/ or small business classification below.

Asian African American Women Owned Hispanic Veteran
Small Business Native American Service Disabled Veteran Physically Challenged Other

If you answered yes to any of the diversity categories listed above, please indicate the certifying agency or organization for you business (Minority Business Enterprise Council, Department of Transportation, or Small Business Administration, etc.). _____

I, the undersigned as an authorized representative of the company listed above, agree to the University of Pennsylvania Purchase order Terms and Conditions reference herein and certify that the information provided to the University of Pennsylvania is current and accurate.

Print Name: _____ Print Title: _____

Signature: _____ Date: _____

Please fax the completed Supplier Questionnaire, W-9 form, Small or Disadvantaged Business Certification Forms to University of Pennsylvania, Purchasing Services Department, Suite 421A, 3401 Walnut Street, Philadelphia, PA 19104-6228. Fax # (215) 898-9396.