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## REQUEST TO ADD A NEW VENDOR

### **Remit To Information:**

Vendor Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Vendor Accounts Receivable Contact: \_\_\_\_\_

Vendor Accounts Receivable Phone: \_\_\_\_\_

Vendor Accounts Receivable Fax: \_\_\_\_\_

Payment Terms: \_\_\_\_\_ Vendor Tax ID #: \_\_\_\_\_

### **Ship From Information:**

Vendor Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Vendor Sales Contact: \_\_\_\_\_

Sales Contact Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### **General Information:**

(Check those that apply and fill in the blanks)

Type of Business: \_\_\_ Manufacture \_\_\_ Distributor \_\_\_ Service

Minority Owned Business? \_\_\_ ISO Certified? \_\_\_ QS Certified? \_\_\_

Number of Employees: \_\_\_\_\_ Years in Business: \_\_\_\_\_

Ownership: \_\_\_ Corporate \_\_\_ Partnership \_\_\_ Private

Annual Sales: \_\_\_\_\_

Capabilities, products, and services: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Major Customers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **To Be Completed By Niles Industrial When Vendor is Set Up:**

Vendor Code: \_\_\_\_\_

Entered By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_