

Beta Alpha Psi - New Supplier Request Form

bap@bapeo.org

11161 E State Rd 70 Ste 110-608 Lakewood Ranch, FL 34202 919.402.4044

Please fill out form in its entirety and email to bap@bapeoorg. Incomplete forms will be returned.

Full Legal Name						
DBA (if applicable)						
Primary Industry						
Dun & Bradstreet (if applicable)						
TIN or Social Security Number						
Physical Address						
Remittance Address						
(if different than Physical)						
Customer Service Contact Name						
Customer Service Email						
Customer Service Phone						
Existing Supplier	Yes		No			
Publicly Traded	Yes		No			
Diverse Supplier	Yes		No			
If yes is checke	d, specify below. Defi	ined as at least 51	% ownership in one of	f the classes listed:		
Ethnic Minority	Yes	No	Women Yes	No		
Veteran	Yes	No	Disabled Yes	No		
Disabled Veteran	Yes	No				
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Beta Alpha Psi standard terms are Net/30.						
Beta Alpha Psi accepts payments via ACH direct deposit or by check.						
Supplier will pay by check						
ACH Payment information						
I hereby authorize Beta Alpha Psi to receive d	deposits from my accour	nt via the financial	institution named below	v. Further, I agree not to hold Beta Alpha Psi responsible for	any delay or loss	
				error on the part of my financial institution in depositing fun		
This agreement will remain in effect until Beta Alpha Psi receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form. Check						
copy, deposit slip or bank letter for account confirmation required.						
Submit invoices to bap@bapeo.org						
Name of Financial Institution						
Name on Account						
Bank Street Address						
Bank City, State, Zip, Country						
Routing Number						
Account Number						
Swift Code						
Type of Account			Savings			
Authorized Signature		Date				
Payment notification E-mail						
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REQUIRED FORMS

W-9/W-8

Copy of Cancelled/Voided Check, Deposit slip or Bank Letter for bank account verification