

Account Information

Vendor Registration – Form 1

Supplier Details – Company information		
Trading name:	Legal name:	
NZBN:		
Address Line 1:		
Address Line 2:		
City:	Country:	
Contact:	E-mail:	
Telephone:	Web site address:	
List of products and/ or services being supplied:		
Primary business type:	Reseller <input type="checkbox"/> Manufacturing <input type="checkbox"/> Service <input type="checkbox"/> Distribution <input type="checkbox"/>	
	Other:	
Legal form:	Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/>	
	Other:	
If corporation:	Division <input type="checkbox"/> Joint venture <input type="checkbox"/> Subsidiary <input type="checkbox"/>	
	Privately held <input type="checkbox"/> Traded <input type="checkbox"/> Other <input type="checkbox"/>	
If subsidiary, division, or joint venture please list affiliated companies	Affiliated company/address, Country	Relationship to your company
Years of operation:		

Supplier Details – Certifications and Insurances	
Quality/ISO Certifications:	Expiry date:
Environmental Certifications:	Expiry date:
Public Liability:	Expiry date:
Workers Compensation:	Expiry date:

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Bank Details – Remit to address		(For Fuji Xerox Accounts Payable)	
Account Name:	Remittance Email:		
Bank & Branch Name:	Bank Country:		
Bank A/C Number:	BSB:		
Swift Code:	GST Registration #:		
Currency:	Other:		
Are Visa/Amex card merchant facilities available? <input type="checkbox"/> YES <input type="checkbox"/> NO			

Company financials:	Current year forecast	Last year (N-1)		Previous year (N-2)
Revenue:				
Income:				
Year end cash flow:				
Number of employees:				
How many sites does your company operate? Please list.				
List of major customers and the product(s) and/or services being supplied:				
Please provide two current customer references:	Company name	Contact name	Phone number	Email
What are the main aspects of your business that are outsourced to a third party?				
Please give percentage of your current Market segmentation. % of total turnover	Industry Segmentation	%	%	%
	Geographic Segmentation	%	%	%

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Are you a current or past supplier to Fuji Xerox?	Fuji Xerox Division	Fuji Xerox Location	NZD volume	Contact name
Any comments or additional information?				

Declaration

Certification Statement

I confirm by signing below that, to the best of my knowledge, all information supplied is accurate and correct.

Name:

Signature:

Date:

Approved by Fuji Xerox

Full Name	Signature
	Date:
	Date:

Comments: