STEVENS REALTY GROUP



REAL ESTATE • PROPERTY MANAGEMENT • CONTRACTING

NEW VENDOR APPLICATION

Legal Name:

DBA (Doing Business As):

Vendor Type: \Box Supplier \Box Subcontractor \Box Consultant \Box Other _____

Vendor Address:

Remit to Address:

Type of Business:
Corporation
Partnership
LLC
Sole Proprietor/DBA
Individual

Employer ID#:

Telephone #:

- Contact Name:
- Email Address:

Vendor Signature:

Title:

Payment Terms:

Discount Terms:

PLEASE PROVIDE YOUR CERTIFICATE OF INSUANCE AND SIGNED W-9 ALONG WITH THIS APPLICATION. NO PAYMENTS CAN BE PROCESSED WITHOUT THESE DOCUMENTS COMPLETED.

Please fax all documents to 845.256.8865 or email info@stevensrealtygrp.com