



VENDOR INFORMATION UPDATE AND CHANGE FORM

The Fort Worth Transportation Authority, dba Trinity Metro, would like to thank you for working with our organization. If there are any changes to your business information, complete this Vendor Information Update and Change Form.

Email completed form and applicable documentation to accountspayable@rideTM.org or mail form to Trinity Metro, Attn: **Accounts Payable**, 801 Grove Street, Fort Worth, TX 76102. Please include your company's latest W9 and official documentation related to the updated information. If you have questions, please contact Accounts Payable at 817.215.8700. The information you provide is for internal purposes only.

A. Business Name:

Legal Business Name: _____

Registered DBA, *if different from above*: _____

Federal ID: _____

Has the business name changed? *(If so, include previous name)* _____

B. Ordering Information Update: Update

To add or update remittance address, complete section C

Mailing Address*: _____

City/State/Zip: _____

Contact: _____

Phone: _____ Fax: _____

Email Address: _____

Net Terms: _____



C. Payment Information Update: Update

Payment Type (to update, select one): Check Credit Card Wire ACH**

Billing Address*: _____

City/State/Zip: _____

Remittance Contact: _____

Phone: _____ Fax: _____

Remittance Email Address: _____

****NOTE:** Please complete a *Authorization Agreement for Electronic Fund Transfer (ACH)* if ACH banking information has changed.

D. Contact Information Update: Update

Contact 1		Contact 2	
Name:		Name:	
Title:		Title:	
Email:		Email:	
Phone:		Phone:	

*OFFICE USE ONLY:			
<i>Note: If address in "Ordering Information" and "Payment Information" sections are different, create a Vendor Remit account in addition to the primary Vendor account.</i>			
JDE Supplier#:		JDE Supplier VR #:	
Vendor Update Approved By:		Date:	
Update Entered in JDE By:		Date:	