



**New Vendor/Substitute W-9 Form- FOR BUSINESSES**

THE UNIVERSITY WILL NOT PAY VENDORS UNTIL THIS FORM IS PROVIDED

Check all appropriate business categories:

Corporation  Limited Liability Comp  Sole Proprietorship  Partnership  Other

WBE

DBE

MBE

SBE

Business Name:

Name as shown on your IRS record, if different from Business Name (“dba” businesses must list Owner Name here)

Remittance Address:

Address 1

Address 2

City, State, Zip

Contact Name:

Contact Phone/Fax:

Business Purpose

Email Address

(Required for Direct Deposit)

**Direct Deposit Information: (Voided check must be attached)**

**Direct deposit is optional but is Wesleyan’s preferred method of payment. Check requests may result in delayed payment.**

Bank Name

Account Number

Ck  Sav

Routing Number/Bank ID

We understand that including our banking information above indicates that we authorize Wesleyan University to initiate electronic credit entries (direct deposit), and if necessary, debit entries or adjustments for any funds to which we are not entitled upon notification from Wesleyan. We will notify Wesleyan of any changes to the information above and understand that failure to do so may result in delayed payment.

Signature for direct deposit \_\_\_\_\_ Title \_\_\_\_\_

ACH transfer/PPD format

**Tax Identification Number (TIN):**

The TIN provided must match the Name on IRS Record, to avoid backup withholding. For individuals with a “dba” business, this is your Social Security Number; for other entities, it is your Employer Identification Number (EIN)

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ EIN/FEIN \_\_\_\_\_ - \_\_\_\_\_

**\*\*\*Signature \_\_\_\_\_ Title \_\_\_\_\_**

**YOUR CONTACT AT WESLEYAN (Name/Department): \_\_\_\_\_**

**INSTRUCTIONS: Complete and return by one of the methods listed below.**

-Fax to 860-685-2814

-Scan and email to [ap@wesleyan.edu](mailto:ap@wesleyan.edu)

-Mail to Wesleyan University, Finance Office, Accounts Payable, 287 High Street, Middletown, CT 06459

If you have any questions concerning this form, please contact Tamara (860) 685-2843 or Crystal (860) 685-2842.

Note: Under Connecticut state tax law, Wesleyan University may be required to withhold 6.7% for payments made to Athletes and Entertainers that meet the criteria. Please see <http://www.ct.gov/drs/lib/drs/publications/pubsp/2008/ps08-1.pdf>