





**GOVERNMENT OF NEWFOUNDLAND & LABRADOR**  
**OFFICE OF THE COMPTROLLER GENERAL**  
**FINANCIAL AND INFORMATION SYSTEMS DIVISION**  
**SUPPLIER SETUP AND MAINTENANCE FORM**

These instructions are to assist Suppliers in completing the Government of Newfoundland and Labrador Supplier Setup and Maintenance Form in order to receive your payments via direct deposit.

***For the purposes of this form, a Supplier or Vendor is an individual, business entity or organization that receives, or may receive, a payment from the Government of Newfoundland and Labrador. The information requested on this form is to facilitate the processing of payments.***

Please note that the completion of this form **does not** substantiate an application for a payment from the Government of Newfoundland and Labrador, in the form of a Government Program or other form of financial assistance. Government Programs are made available through the respective Government departments, who have different information requirements, therefore necessitating a separate application process.

**Submit completed Supplier Setup and Maintenance form as follows:**

**In Person:**

Office of The Comptroller General  
3rd Floor, East Block, Confederation Building (West Wing)  
Attention: Financial and Information Systems Division - Supplier Maintenance

**By Fax:** (709) 729-4117

**By E-mail:** Electronic / scanned copies may be e-mailed to: [vendormaintenance@gov.nl.ca](mailto:vendormaintenance@gov.nl.ca)

**By Mail:**

Office of the Comptroller General  
Confederation Building, 3<sup>rd</sup> Floor, East Block, West Wing  
P.O. Box 8700, St. John's, NL A1B 4J6  
Attention: Financial and Information Systems Division – Supplier Maintenance

For general inquiries please contact Vendor Maintenance via e-mail at [vendormaintenance@gov.nl.ca](mailto:vendormaintenance@gov.nl.ca) or the FMS Helpdesk via telephone at 709-729-2670. If you have any questions about this collection of your personal information, please contact the Information Management Analyst for the Financial and Information Systems Division at the above-noted address, by phone at (709) 729-2670 or by email at [fmshelpdesk@gov.nl.ca](mailto:fmshelpdesk@gov.nl.ca).

**It is the responsibility of the Supplier to notify the Government of Newfoundland and Labrador promptly via this form should any of the Supplier information change. Please print and retain a completed copy of this form for reference and note your assigned supplier number on it for future correspondence.**

Please follow the instructions below to ensure that the Supplier Setup and Maintenance Form is properly completed.

**Section 1: Action Required**

**Add a New Supplier:** Check this option if you are not currently a Supplier to the Government of Newfoundland and Labrador. If you are a Business please provide a copy of an invoice, quote, or letter from a company official confirming the name and address provided.

**Add a New Supplier Address:** Check this option if you are currently set up as a Supplier but wish to add an additional address. For example, an additional business location or an office address where you wish to receive payment or correspondence.

**Inactivate a Supplier Number/Address:** Check this option if you are currently set up as a Supplier, but wish to deactivate your Supplier Number or a Supplier address for reasons such as a business closure, you do not expect any more payments from the Government of Newfoundland and Labrador or a location no longer exists.

**Change the Name of an Existing Supplier:** Check this option if you or your business has had a change in name. Please note that for a Business, the name registered with your CRA business number is required. You may also indicate the trade name for your business, if applicable, in the first line of the Address field as "Operating as [Trade Name]", in addition to your legal name. If you are a Corporation, you must follow the necessary procedure outlined by the Registry of Companies with Service NL in order to change your corporation name. You must then attach a copy of the corporation's Articles of Amendment as supporting documentation to confirm that the company name has been changed.

**Change the Address of an Existing Supplier:** Check this option if you are currently set up as a Supplier and have had a change in address information, i.e. changes of address, or Address Use [Payment or Shipping (Purchase) Address]. Please see Section 2: Address Use for more information on address type.

**Add/Change Banking Information or Email Address:** Check this option if you are an existing Supplier and you wish to add or change your banking information or email address to facilitate receiving Electronic Funds Transfers (EFT's) as the form of payment or notification of electronic payment.



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**Section 2: Supplier Information**

**Supplier Type:** Please indicate the type of Supplier being added or modified.

- If you are a *Business*, please indicate whether it is a Corporation, Partnership, Sole Proprietorship, or Other Business.
- If you are an *Individual*, please indicate whether you are an Employee of the Government of Newfoundland and Labrador, a Member of the House of Assembly (MHA), or an Other Individual Supplier that is not one of the above noted Supplier types.

**Supplier Number:** A unique number assigned to you by the Financial and Information Systems Division. Existing Suppliers to the Government of Newfoundland and Labrador should provide their Supplier Number for Supplier identification purposes.

**Address Use:** For Businesses please indicate the purpose of the address noted on the form by selecting the Address Use as follows:

- Select *Payment Address* if you are requesting to receive a payment for the address provided.
- Select *Shipping (Purchase) Address* if the address provided on the form is for purchasing purposes only.
- Both *Payment Address* and *Shipping (Purchase) Address* should be selected if you are an individual or if the address provided is the same for payment and purchasing purposes.

**Supplier Name:** Please enter your full legal name (first, middle and last name). If this request is for a Business, please enter your legal Business name. Also please include your trade name, if applicable, in the first line of the Address field as "Operating as [Trade Name]". Please provide any sole proprietor name, operating as name or incorporation name if it differs from the current name.

**Name at Birth:** Please provide your name at birth if it is different than your supplier name (first, middle and last name), if it is the same, please leave blank.

**Date of Birth:** If applicable, please enter your date of birth.

**Business Number – Registration Number (BN):** A Business Number is a unique nine digit business identifier provided by CRA. If you do not have a Business Number, please indicate in the 'Not Applicable' check box.

**Are you a Provincial Supplier?:** A Provincial Supplier is a supplier of goods, services, public works or leases of space that has a place of business located in Newfoundland and Labrador where they regularly conduct activities on a permanent basis.

**Address:** Please provide the address applicable to the **Address Use** selected. For changes of address to existing addresses provided in Section 2, please attach the former address to confirm that the correct address will be updated. A Supplier will need to submit multiple forms if multiple addresses are required upon initial setup.

**Supplier Contact Information:** Include as much contact information as possible. The Financial and Information Systems Division may need to confirm, verify, or obtain additional information. Please provide an e-mail address or write 'N/A' if this does not apply. E-mail addresses are used to notify suppliers that an electronic payment is pending and/or for notification of Supplier Number. If a valid e-mail address is not provided, you will **not** receive a notification of your Supplier Number, or of a pending electronic payment.

**Section 3: Electronic Payment Setup**

**Electronic Payment Setup:** Please attach a void cheque or correspondence from your financial institution with your banking information. This correspondence must include the stamp of the Financial Institution. Alternatively, you may have your financial institution complete Section 3 of the form. If you are an employee of the Government of Newfoundland and Labrador and wish to use the same information previously provided to payroll for electronic payment, please indicate accordingly on the form. Acceptable documentation types include: Originals, Photocopies, Electronic scans, or Faxed copies. Note that a valid e-mail address of the Supplier must be provided in order to facilitate electronic payment.

**Section 4: Government Department use only**

If this form is being completed by a departmental official with the Government of Newfoundland and Labrador on behalf of the Supplier, please provide the contact information requested and sign for verification purposes. Financial and Information Systems Division staff may need to confirm, verify, or obtain additional information.

**Section 5: Financial and Information Systems Division use only**

This section is completed by Financial and Information Systems Division of the Office of the Comptroller General upon processing the Supplier Setup and Maintenance Form.