



Vendor Registration/Change Details Form

Use this form to register as a supplier of goods and services to Origis Energy or to change your details.

Vendor Details

Entity Name	
Trading Name (if different)	
Taxpayer ID# (TIN) --	
Entity	

Address Information

Accounts Receivable	Contact Email:	
Contact	Address:	
	Phone Number:	Fax Number:
Payment Address		

Please choose your preferred payment method: ✓

ACH Payment Information

Account name		
Bank Name/Branch Location		
Routing # (ABA #)		Account #

Wire Payment Information

Account name		
Bank Name/Branch Location		
Routing # (ABA #)		Account #

Check Payment Information

Check Payable to:	
Address	

Declaration

I declare I am authorized to provide the above information on behalf of the Vendor listed

Name			
Signature		Date	
Job Title / Position			

Origis Energy AP Contact

Invoices Should be	AP@origisenergy.com
Remitted to:	(786) 693-2624

Submitting this signed & completed form

Scan & email to: AP@origisenergy.com

Privacy: Any personal information provided by you on this form is being collected by Origis Energy for business, accounting and reporting purposes. It may be disclosed to other government agencies for those purposes. The information has been provided voluntarily. The information will be stored securely. You may access or correct your information by contacting Origis Energy at the contact information above.

Origis Contact Authorization:

SAP Supplier No.:		
Company Code:		

