



1. Vendor Information **NON-US ENTITY VENDOR SET-UP FORM**

Legal Business Name	DBA - if different
Physical Address - number, street, and apt or suite #	Payment Remit Address - as it appears on your invoice
City or Town and Country - Postal Code when appropriate	City or Town and Country - Postal Code when appropriate
Contact Name	Payment Terms (chose from drop-down list) Default is our Preferred Terms
Phone Number	Unique Entity ID - UEI (SAM) Do Not Have UEI
Email Address / Website	DUNS#

2. Bank / Wire Transfer Information

Name	Branch Number
Address Line 1	Sort Code
Address Line 2	International Bank Account Number (IBAN)
City or Town and Country - Postal Code when appropriate	BIC / SWIFT Number

3. Declarations

a. Tax Certification - Select One:

I certify that the Individual/Vendor on this form is a Non-US Entity and is exempt from United States Tax withholding.

I certify that the Individual/Vendor on this form will be claiming treaty benefits and will provide a Form W-8BEN to Applied Research Associates, Inc.

b. Do you have any Active Exclusions in SAM (System for Award Management)? Yes No

c. Covered Telecommunications Equipment / Services - Representation

1. Definitions. As used in this provision, "covered telecommunications equipment or services" has the meaning provided in the clause FAR 52.204-25, Prohibition on Contracting for Certain Telecommunications and Video Surveillance Services or Equipment (Aug 2020).
2. Representation. Seller represents that it
 - Does
 - Does Not
 Provide covered telecommunications equipment or services to Applied Research Associates, Inc. in the performance of any contract or other contractual instrument.

4. Certification

I understand that by completing this form, it does not obligate or guarantee business.

Name & Title of Authorized Representative	Signature of Authorized Representative	Date