**REQUEST FOR ADDITION OF NEW VENDOR**

This form is required to create a new vendor in the County’s financial system for the purpose of issuing purchase order(s).

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| **TO BE COMPLETED BY THE VENDOR OR COUNTY DEPARTMENTAL CONTACT** | |
| **Is Vendor a Company or Person:** | Choose an item. |
| **Legal Vendor Name:** | Click here to enter text. |
| **Vendor Doing Business As:**  *(If Different Than Above)* | Click here to enter text. |
| **Vendor HST Number:** | Click here to enter text. |
| **Vendor Mailing Address:**  *(Street, City, Province, Postal Code)* | Click here to enter text. |
| **Vendor Phone Number:** | Click here to enter text. |
| **Will Vendor Accept Visa:** | Choose an item. |
| **Vendor Industry Code:** | Choose an item. |
| **Description of Product and/or Service:** | Click here to enter text. |
| **Vendor Contact Name for Purchase Order Submission:** | Click here to enter text. |
| **Vendor Email Address for Purchase Order Submission:**  *Where possible, please provide a generic address to avoid delays* | Click here to enter text. |
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| **TO BE COMPLETED BY THE COUNTY DEPARTMENTAL CONTACT** | |
| **Department Requesting New Vendor:** | Click here to enter text. |
| **Departmental Requestors Name:** | Click here to enter text. |
| **Date of Request:** | Click here to enter a date. |
| **Vendor Group Key:** | Choose an item. |
| **OCCMS Number***(Children Services only)***:** | Click here to enter text. |
| **Is a Cheque Required:**  *(Visa and EFT are the County’s methods of payment. Cheque payment is by exception only).* | Choose an item. |

***Please allow up to 48 hours for procurement staff to process this request.***

September 11, 2019

**ATTENTION: ACCOUNTS RECEIVABLE**

**RE: Electronic Funds Transfer (EFT) / Direct Deposit**

The County of Simcoe has implemented EFT as our only method of payment (with the exception of VISA payments) and requires all vendors to supply banking information prior to receiving payment from the County of Simcoe.

The County’s standard payment terms are NET 28 days from the date of invoice.

EFTs are processed on a weekly basis according to the invoice due date with the payment file being transferred on Thursdays, resulting in funds deposited to vendors’ bank accounts on Fridays or Mondays depending on the vendors’ financial institutions.

Remittance slips indicating the invoice number, vendor number, amount being deposited and the date of deposit are sent via email. Vendors without access to email will receive hard copy remittance slips via regular mail.

Please complete the attached EFT/Direct Deposit enrolment form and return with a void cheque, e-copy void cheque, or a direct deposit form from your financial institution confirming account information (e.g. Institution No., Transit No., Account No.).

By returning this form you are consenting to receive electronic or traditionally mailed communications from the County of Simcoe.

Should you have any questions regarding this payment process, please contact the Procurement Department at 705-726-9300, or by email [simcoe-purchasing@simcoe.ca](mailto:simcoe-purchasing@simcoe.ca).

Kind Regards,

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| --- | --- | --- |
| ***Lealand Sibbick***  Treasurer |  | ***Dawn Hipwell***  Director, Procurement, Fleet and Property |

**EFT / DIRECT DEPOSIT ENROLMENT FORM**

This form is required to create a new vendor’s banking information in the County’s financial system for the purpose of issuing payment(s).

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| **TO BE COMPLETED BY THE VENDOR** | |
| **Is Account Holder a Company or Person:** | Choose an item. |
| **Name on Account:** | Click here to enter text. |
| **Account Holder Mailing Address:**  *(Street, City, Province, Postal Code)* | Click here to enter text. |
| **Account Holder Phone Number:** | Click here to enter text. |
| **Vendor Contact Name for Payment Remittance:** | Click here to enter text. |
| **Vendor Email Address for Payment Remittance:**  *Where possible, please provide a generic address to avoid delays* | Click here to enter text. |

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| FINANCIAL INSTITUTION/BANK INFORMATION:  *VOID CHEQUE (e-cheque, copy acceptable) OR DIRECT DEPOSIT FORM FROM FINANCIAL INSTITUTION REQUIRED,* clearly stating the institution, transit, and account numbers on the account where payments will be deposited. The void cheque, copy of void cheque, or direct deposit form will ensure payment to the appropriate account. Payment cannot be processed without banking information. |
| ***ATTACH VOID CHEQUE HERE*** |

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| --- | --- | --- | --- | --- |
| Date: | Click here to enter a date. |  | Name/Signature: | Click here to enter text. |

September 11, 2019

**NOTICE TO ALL SUPPLY AND SERVICE PARTNERS**

Dear Valued Vendor,

This letter serves as a notice that where goods/services have been provided to the County of Simcoe, and payment is via Purchase Order, all original invoices must be directed by email to [accounts.payable@simcoe.ca](mailto:accounts.payable@simcoe.ca), or alternately by hard copy mail to the County’s Accounts Payable Department located at the Administration Centre, 1110 Highway 26, Midhurst, ON, L9X 1N6. The County cannot ensure payment of invoices that are directed to individual staff members or to any other County locations.

Payment options to ensure prompt payment for goods and services are:

Option 1 – Payment by Visa

This is the County’s preferred method of payment. Where payment is to be remitted by Visa, a vendor must obtain a Visa number from the County contact prior to commencing the work and should charge the Visa card immediately following County approval of the work. A payment receipt must be provided to the County contact to facilitate Visa reconciliation. When Visa is utilized, please do not send invoices to the County’s Accounts Payable department.

Option 2 – Payment via Purchase Order/Invoice

For payment via traditional purchase order and invoice, prior to issuance of an invoice the vendor must:

1. Provide the County contact with an Advanced Invoice Notification (AIN) or work summary clearly noting the Purchase Order number, the progress of the work, and specific details of the charges to be invoiced. This will be used by staff to verify the purchase and initiate the payment process prior to invoice submission.
2. The AIN may be a packing slip, other written notification, or copy of the proposed invoice with the words “FOR RECEIVING PURPOSES ONLY” clearly noted on its face.
3. The Advanced Invoice Notification (AIN) must contain the following details:
   1. Units of work and pricing as noted on the Purchase Order;
   2. Vendor Name/Address;
   3. Date of Invoice;
   4. Invoice Number;
   5. County Purchase Order Number;
   6. Invoice period (e.g. November 01 – November 30, 2019);
   7. H.S.T. shown separately and Contractor’s H. S. T. registration number.

**Please allow a minimum of 48 hours for staff to process the AIN before the submission of the related invoice.**

1. Unless otherwise agreed, Vendors shall invoice the County by the 10th day of the month for services supplied during the prior month. Invoices shall include a valid County purchase order number. Following receipt of the proper invoice, the County shall pay the vendor net twenty-eight (28) days from the date of the invoice.
2. Invoices will be paid via electronic funds transfer (EFT) which shall be deposited directly to the vendor’s bank account.
3. If any deviation from the above method of payment is necessary such deviation shall be mutually agreed upon and confirmed in writing by both the vendor and the County.
4. New vendors to the County are required to complete and submit a Request for Addition of New Vendor and EFT / Direct Deposit Enrollment form to facilitate payment.

Should you have any questions regarding the payment process, please contact the Procurement Department at 705-726-9300, or by email [simcoe-purchasing@simcoe.ca](mailto:simcoe-purchasing@simcoe.ca).

Thank you for your cooperation.

Sincerely,



Catherine Payne, CPPO, C. Mgr.

Manager, Procurement & Sustainable Operations