



VENDOR CHANGE REQUEST

County of Oakland
Department of Management & Budget
Fiscal Services Division
Executive Office Building
2100 Pontiac Lake Rd Waterford MI 48328
Phone (248) 858-5489 Fax (248) 452-2148

Date \_\_\_\_\_

Requesters Signature \_\_\_\_\_

Requesters Name (Please Print) \_\_\_\_\_

Requesters Phone Number \_\_\_\_\_

FEDERAL TAX IDENTIFICATION NUMBER

(Use Social Security Number if sole proprietor)

TIN [ ] SSN [ ]

Please type or print clearly. Un-Signed change forms will be returned to you.

- Change Business Name Only (Any change in a Business Name requires a W-9 to be submitted with this form)
Change Business Address Only
Change Both Business Address and Remittance Address
Change Contact Person
Change E-mail Address
Change Remittance Address Only
Change Phone Number
Change Fax Number

Old Business Name and Address

Form with fields: Legal Business Name, Address Line One, Address Line Two, City, State, Zip+4, (Area Code) Phone, (Area Code) Fax, Contact Person, E-mail Address

New Business Name and Address

Form with fields: Legal Business Name, Address Line One, Address Line Two, City, State, Zip+4, (Area Code) Phone, (Area Code) Fax, Contact Person, E-mail Address

Old Remittance Address

Form with fields: Legal Business Name, Address Line One, Address Line Two, City, State, Zip+4, (Area Code) Phone, (Area Code) Fax, Contact Person, E-mail Address

New Remittance Address

Form with fields: Legal Business Name, Address Line One, Address Line Two, City, State, Zip+4, (Area Code) Phone, (Area Code) Fax, Contact Person, E-mail Address