UOWD FINANCE - SUPPLIER DETAILS



	S	UPPLIER DETAILS	IN DUBAI
SUPPLIER NAME IN FULL			
CURRENT MAILING ADDRE	ss		
TAX REGISTRATION NUMBI	ER ER		* For suppliers within United Arab Emirates
STATE/EMIRATE		POST CODE	
	UNTRY		
PHONE NO	MOBILE NO	E-mail	
SUPPLIER'S BANK DETAILS			
BANK NAME			
BRANCH			
BENEFICIARY NAME			
ACCOUNT NO		CURRENCY INVOICED	<u> </u>
SWIFT/ROUTING NO		IBAN	
	TE	RMS & CONDITIONS	
1. UOWD is under no obligation to verif		any changes must be notified to UOWD in writi	ing.
2. UOWD will not be responsible for any delays in payment or errors outside the reasonable control of UOWD including but not limited to delays or errors in the banking system or			
errors in bank account details provided. 3. UOWD payment terms will be as per			
4. For local suppliers within UAE, Invoid	ces without Tax Number will not be ho	noured from 1st January 2018.	
		to the Vendor in error and UOWD reserves the	e right to set off the amount of any
overpayments.made in error against any future debt or liability owing by UOWD to the Vendor.			
Full Name Authorized Signature & Stamp			
Position	Da	de	
DECLARATION TO BE FILLED BY UOWD STAFF			
This section need to be filled by the department who has intiated the purchase request			
I have reviewed No current alternate		liers and request the addition of this new s	supplier due to (please tick); chase (Attach documents to support)
☐ One off speciality p			vice (Attach documents to support)
☐ Not available from p	preferred supp l ier	Other, please specify	below
FULL NAME	e scan & email the completed f	orm to accountspa <u>yable@uowdubai.ac.</u> E-MAIL	ae for processing
POSITION		PHONE	
UNIT/DEPT		FAX No	•
Description	of goods or services being pro	cured attach documentation along with	the Payment requisition
To classify the Supplier a clea	ar description of goods/services is	required. If the description is unclear the for	rm may be returned for further clarification.
Signature		Date	
FINANCE USE ONLY			
JDE SUPPLIER NO		Reviewed By:	
Entered By :	Date	Date	
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