



Finance Department
4430 South Adams County Parkway
Brighton, CO 80601
Email: vendors@adcogov.org

NEW VENDOR SET-UP APPROVAL FORM

Complete contact information

Vendor Name: _____

Vendor Contact Name: _____

Phone #: _____ **Email:** _____

Adams County Employee requesting Vendor Info: _____

Complete if the 'Remit To' info is different than the W-9 info

Vendor Address: _____

City: _____ **State:** _____ **Zip:** _____

To be paid by ACH, complete the information below

Bank Account Name: _____

Bank ACH Routing Number: _____

Bank Account Number: _____

Email for Backup Documents: _____

Include a voided check (not a temporary check or deposit slip) or a signed bank letter that includes all information requested in this section

Authorized Vendor Signature: _____

Authorized Vendor Printed Name: _____

Today's Date: _____

Complete the attached W-9.
Email this form AND the W-9 to vendors@adcogov.org