

Vendor Information Form – Instructions

1. Complete the “Current Information” Column

All vendors, new or existing- **must** complete the Current Information column on both pages of the form. This section **must** reflect your organization as it exists today and include:

- Legal name of the entity (must match Line 1 of the W-9)
- Federal Tax ID (EIN)
- Disregarded entity details, if applicable
- DBA (Doing Business As), if applicable
- Registration statuses (LBE, SBA categories, PHLContracts)

2. Instructions for New Vendors

***If you are submitting the Vendor Information Form for the first time:**

- Complete only the **Current Information** column.
- *Note- organization Information must match a signed W-9 dated within the past 6 months.
- Submit the W-9 with this form dated within the past 6 months.

3. Instructions for Existing Vendors

****If you are already registered as a vendor with the City of Philadelphia:**

- Enter all up-to-date details in the **Current Information** column.
- Only information that reflects your current status should appear in this column.
- Use the **Former Information** column to list any information previously provided to the City.
- Organization Information must match a signed W-9 dated within the past 6 months.
- Submit the W-9 with this form dated within the past 6 months.

4. Business Registration Sections

- **City of Philadelphia – Local Business Entity (LBE):**

Indicate “Yes” or “No” in both the Current and Former Information columns.

- **U.S. Small Business Administration (SBA) Programs:**

- Small Business Enterprise (SBE)
- Small Disadvantaged Business (SDB)
- 8(a) Business Development Program

- **PHLContracts Registration:**

Indicate whether your business is registered in PHLContracts.

5. Address & Contact Information Requirements

- **Corporate Address**

Provide the legal business address (street, suite, city, state, zip).

- **Mailing Address**

Where general correspondence should be sent; may differ from corporate address.

- **Payment Address**

Specify the address where payments should be mailed (e.g., lockbox or finance office).

- **Vendor Contact Information**

- Primary Contact: Name, phone number, email
- Secondary Contact: Backup contact when the primary is unavailable
- Vendor Payment Contact: Name, phone number email

- **Website**

Provide your business website, if applicable.

6. Submitting the Form

Submit the completed form and required attachments, including W-9 to:

pvcoop@phila.gov



Vendor Information Form

City of Philadelphia Procurement Department
1401 JFK Blvd. MSB Room 170B, Philadelphia, PA 19102-1685
Email: pvcoop@phila.gov

Instructions

New Vendors: For vendors registering with the City for the first time, only the **Current Information** column needs to be completed. The **Organization Information** section must match a current, signed W-9 (within the past 6 months) submitted along with this form.

Existing Vendors: For vendors already doing business with the City, the **Former Information** column should reflect the information that was previously on file with the City. All changes to information previously submitted should be reflected in the corresponding field(s) under the **Current Information** column. Any updates to the **Organization Information** section must match a current, signed W-9 (within the past 6 months) submitted along with this form.

Questions, completed forms, and accompanying documentation can be submitted to pvcoop@phila.gov.

Former Information

Current Information

Organization Information

Name of Entity W-9 line 1

Federal Tax ID (EIN) W-9 part I

Doing Business As (DBA) W-9 line 2
(if applicable)

Disregarded Entity Name W-9 line 2
(if applicable)

Disregarded Entity EIN
(if applicable and it has its own, distinct EIN)

**Are you registered with the
City of Philadelphia as a Local
Business Entity (LBE)?**

Yes ☐ No ☐

Yes ☐ No ☐

**Are you registered with the
U.S. Small Business
Administration?**

- Small Business Enterprise (SBE)
- Small Disadvantaged Business (SDB)
- 8(a) Business Development Program

Yes ☐ No ☐

Yes ☐ No ☐

Yes ☐ No ☐

Yes ☐ No ☐

Yes ☐ No ☐

Yes ☐ No ☐

**Are you registered on
PHLContracts?**

Yes ☐ No ☐

Yes ☐ No ☐

Former Information

Current Information

Corporate Address

Address Line 1

Address Line 2

City/State/Zip code

Mailing Address

(name and address for correspondence)

Business Name

Address Line 1

Address Line 2

City/State/Zip code

Payment Address

(name and address for payments)

Business Name

Address Line 1

Address Line 2

City/State/Zip code

Primary Vendor Contact

Name

Phone Number

Email Address

Secondary Vendor Contact

Name

Phone Number

Email Address

Vendor Payment Contact

Name

Phone Number

Email Address

Website Address

Rev. 6/12/26

By submitting this form you verify that all information submitted to the City of Philadelphia is true and correct and you are notified that submission of false information by you is subject to the penalties of 18 Pa.C.S Section 4904 relating to unsworn falsification to authorities.

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