

SCTA  
NEW VENDOR FORM

Please provide the following information when submitting a request to add / utilize a new vendor. Attach the vendor's W-9 form (CC-84) and the Insurance Waiver (CC-81) to this form. Must be completed.

Vendor Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone #: \_\_\_\_\_

Tax ID #: \_\_\_\_\_

A W-9 form is required for any person or business that is providing a service to our organization. The Insurance Waiver form (if applicable) should also be completed if the business has property onsite.

CC forms are housed on the SCHHCA website.