

**ACCOUNTING DEPARTMENT**

**FOREIGN SUPPLIER REGISTRATION FORM**

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| --- | --- |
| **Supplier Name** |  |
| **Address** |  |
| **Postal Code, City** |  |
| **Country** |  |
| **Phone** |  |
| **Fax** |  |
| **E-mail** |  |
| **Currency** |  |

**Supplier Bank Information**

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| --- | --- | --- |
| **Supplier Bank** | **Account Holder**  |  |
| **Bank Code + Branch Code** |  |
| **ABA/Routing nb. (USA only – 9 digits)** |  |
| **BIC-SWIFT Code (if applicable)** |  |
| **IBAN (if applicable)** |  |
| **Account Number** |  |
| **Bank Name** |  |
| **Bank Address** |  |

***BIC-SWIFT and IBAN are compulsory for entities located in SEPA countries***

**If applicable, banking information of intermediate bank**

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| **Intermediate Bank** | **Bank Code + Branch Code** |  |
| **ABA/Routing nb. (USA only – 9 digits)** |  |
| **BIC-SWIFT Code (if applicable)** |  |
| **IBAN (if applicable)** |  |
| **Account Number** |  |
| **Bank Name** |  |
| **Bank Address** |  |

**If applicable, EU VAT Identification Number**

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|  |

**Date of submission:**

**Please provide as attached document a Bank Identification Form**

Send this form to the Accounting Agency: https://help.app.u-paris.fr/

Your request cannot be processed unless the form is approved by the requesting department.

Requesting department UPC: Click here to enter text.

Date, signature, stamp (MANDATORY).