

Instructions for the Statewide Payee Registration Form

The term 'payee' refers to an individual or business that received payments from the State of Washington. This form is intended to be used for payees to register with the State of Washington for a Statewide Vendor number (SWV) or to register for Direct Deposit and to change their Direct Deposit registration information.

SSPS must return any form that is not complete, so please be sure to read and follow these instructions carefully. ***Please note forms with crossed out information will be returned; do not use white out. If errors are made, please request a new form***

Step 1: Payee & contact information

- **Legal name of payee** – enter your name as it appears on your SSPS payments and federal tax forms. If your name needs to be corrected or updated, contact the case manager BEFORE you submit these forms.
- **EIN or SSN** – enter the EIN or SSN that we have listed on your SSPS file. This is the number we use to report your payments.
- **Business name** – your “doing business as” name (only if different from your legal name).
- **Contact Person** – name of the person with authority to answer questions regarding the account
- **Mailing address** – enter your PO Box or street address as it appears on your SSPS payments. If your address needs to be corrected or updated, contact the case manager BEFORE you submit these forms
- **Telephone number** – Telephone number of the provider
- **Fax Number** – Provider's fax number if applicable
- **Email address** - enter your email address. We will use the email address to:
 - Notify you when your account has been set up.
 - Notify you when changes you submitted have been made.
 - Notify you when your payment has been processed and what the deposit date will be.

NOTE: We can only maintain one email address in your file. For larger organizations we recommend that you use the email address for a distribution list to ensure that our notifications are received and processed quickly.

- **SSPS Provider Number** – enter your six (6) digit SSPS Provider Number as assigned by the State. If you have a MERIT Stars number and MERIT Provider number, please enter those as well.

Step 2: Select Payment Option

- **Direct Deposit** – Highly recommended
- **Check in US Mail** – Not recommended

Step 2a: Complete all fields for Direct Deposit

- **Financial institution name & phone number** – enter the name and phone number of the financial institution where you want your funds deposited. This **must** be a U.S. institution.
- **Routing number** – this is the 9-digit Bank Identification Number assigned by the American Banking Association. The routing number is the first 9 numbers at the bottom of your check. See example on form. **Do not** use the routing number from a generic deposit slip – these begin with the number '5.'
- **Account number** – this is your bank account number, and can vary in length. It usually follows the routing

number on the check.

- **Account type** – select the kind of account your payment will be deposited into. If you do not make a selection, funds will be transferred into the checking account.
- **Authorization Signature** – in order for us to process the Direct Deposit, we need the signature of the provider on file with the bank.
- **Date** – enter the date the form was signed.

Step 4: W-9

We need a complete, signed and dated W-9 in order to process your registration and verify any changes to it.

1. **Legal name of payee** – enter your name as it appears on your SSPS payments and federal tax forms. If your name needs to be corrected or updated, contact the case manager BEFORE you submit these forms.
2. **Business name** – Enter your “doing business as” name (only if different from your legal name).
3. **Check one box for your IRS reporting type** – you must check ONLY one box to indicate if you are an individual/sole proprietor, corporation, non-profit organization, etc.
4. **If you chose Corporation, S-Corp, Partnership or LLC, check the appropriate box.**
5. **If exempt from backup withholding** - See the W-9 instructions for more information about exemption from backup withholding (most people are NOT exempt).
6. **Mailing address** – enter your PO Box or street address as it appears on your SSPS payments. If your address needs to be corrected or updated, contact the case manager BEFORE you submit these forms.
7. **City, State and ZIP**
8. **Taxpayer Identification Number** – this is the number we use to report your payments to the IRS. Enter your Social Security Number (SSN) OR the Employer Identification Number (EIN) listed on your SSPS file. DO NOT ENTER BOTH.
9. **SIGN and Date the W-9** – In the section called “SIGNATURE OF U.S. PERSON”.

Step 5: Send your completed forms to:

- Mail to: SSPS Provider File Unit, Attn: Direct Deposit, PO Box 45346, Olympia WA 98504
- Fax to: 360-902-8268
- Upload to the SSPS Provider Portal

*****REMINDER*****

FORMS WILL NOT BE ACCEPTED IF WHITEOUT HAS BEEN USED, IF ANY INFORMATION IS CROSSED OUT, OR IF ITEMS HAVE BEEN WRITTEN OVER. IF ERRORS ARE MADE, PLEASE PRINT OR REQUEST A NEW FORM.

PRIVACY STATEMENT: The information you provide on this form will be used to make electronic or warrant payments to you as a vendor and in any related investigations of a violation of federal or state laws. This information is not intended for use by the State of Washington for any other purpose. Any information you provide (such as an individual's name, home address, home telephone number, social security number, bank or other financial account numbers) is a public record, and once it is provided may be protected from release under the Public Disclosure Act, Chapter 42.17 RCW. However, the information you provide may be disclosed if necessitated by legal processes such as subpoena or court order. If you believe information you provided is being used for a purpose other than what was intended when submitted, you should contact WaTech Payee Help Desk at (360) 407-8180. **(4)**