Applying for a Statewide Vendor Number User Guide

Payment Type: For Facilities/Sites

NOTE: This is a user guide intended to serve as instructions to help you complete the Provider Registration Form. This is not the actual Provider Registration Form, which must be filled out here.

Early Achievers Quality Improvement Award or Needs-Based Grants:
- Requires a Facility/Site SWV
- The SWV is connected to an Employer Identification Number (EIN)

Instructions

Part A: Contact Details

- This section asks for the governing person or designated representative contact information in case DCYF needs to get ahold of you.
- The mailing address is where the payment check will be sent.
- This address must be filled out and must match your address in the MERIT Workforce Registry. If your address needs to be updated, complete the update before completing this form.

Part B: Vendor/Payee Registration (Facilities/Sites)

1. Legal Name: Name must match legal business name. (If there is a sole proprietor, this name must match what is on social security card).
2. Business Name: Name must match “Doing Business As” (DBA) name.
3. Check ONLY ONE Box Below: Choose the appropriate business type for your facility/site. Selection must match the type of business entity you registered with DOR and IRS.
4. **For Corporation or Partnership ONLY**: Choose the appropriate selection for your facility/site.

   😊 **If applying for a Facility Award**: Only fill out the SSPS # or the MERIT Provider #.

5. **Legal Address**: This address must be the address listed as the physical business location. If your address needs to be updated, complete the update before completing this form.

6. **City, State, and ZIP code**: This address must be the address listed as the physical business location. If your address needs to be updated, complete the update before completing this form.

7. **Tax Identification Number (TIN)**: If you’re applying for a facility/site payment (Early Achievers Quality Improvement Award or a Needs-Based Grant), check the box “For other entities” and write your Employer Identification Number (EIN). If you are a sole proprietor and do not have an assigned EIN or use your SSN.

8. **Certification**: Read carefully and sign/date with pen.