Generac USA Production Vendor Change Request GENERAC



Vendor Details									
Enter Vendor Numbers for an existing vendor change request:		Main Vendor (VN) #:		In-	voicing Party (PI) #:				
Name Information									
IMPORTANT NOTE:	KIANINOIF:			(USA) or W-8 (NON-USA) tax certificate copy is required uest and enter names below ONLY as shown.					
Formal Business Na									
DBA Name (Doing Business As)									
Facility Address Details									
This address will be displayed on Generac purchase orders.									
Street Address:									
District / County:		City:							
Region / State:	Postal /	Zip Code:		Country:					
PO Box Number:	PO Box	Box Region / State:		PO Box Postal / Zip Code:					
Payment Address Details									
This address is remit to information.									
Check one: San	Address		☐ Use information provided below						
Street Address:									
District / County: City:									
Region / State:	Postal /	Postal / Zip Code:		Country:					
PO Box Number: PO Box City:		City: PO Box	PO Box Region / State:		PO Box Postal / Zip Code:				
Purchase Order Contact Information									
Contact Name: Contact Title:									
Single Email to receive Purchase Orders:									
Telephone: Extension:									

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Contact Name:	Contact Title:								
Payment Notification Email Address:									
Telephone:	Telephone: Extension:								
Payment Information									
IMPORTANT NOTE:	Select one payment method below. Note your initial payments will be held								
, , , , , , , , , , , , , , , , , , ,									
Payment Currency:									
☐ CREDIT CARD - USA ONLY with Net 20 (merchant interchange fees apply)									
For all CREDIT CARD payment methods, please complete the GRiD SAP Generac USA Vendor Credit Card Registration Form per the enrollment details at www.generac.com/about-us/supplier-support									
☐ ACH - USA ONLY with 2% Discount 15 Days, Net 90									
☐ WIRE TRANSFER - NON-USA ONLY with 2% Discount 15 Days, Net 90									
For all ACH or WIRE payment methods, please complete the GRiD SAP Generac USA Vendor Banking Information form at www.generac.com/about-us/supplier-support for your bank account.									
Invoice Remittance Information									
Company Doing Business With: Generac Power Systems, Inc.									
Preference is Email		USA Companies:		Non-USA Companies:					
Send Invoices To: By Mail:		apinvoices@generac.cominvoice@generac.comGenerac Power Systems, Inc.PO Box 295			<u>11</u>				
(Only when email is not available)		Attn: Accounts Payable Waukesha, WI 53187							
Payment Inquiries:		askap@generac.com							
This request will be declined if the below required signatures are missing or incomplete.									
Vendor Signature - REQUIRED									
Title		Signature		Print Name	Date				
Title		Signature		riiit Naiiie	Date				
Generac Signatures - REQUIRED									
Department		Signature		Print Name	Date				
Vendor Request Initiator:									
Initiator's Superv	/isor:		_						

Payment Contact Information