

Please include appropriate supporting documentation with your request form.

CONTACT INFORMATION

Form submitted by:

FULL NAME

UNI/EMAIL

PHONE NUMBER

Affiliation:

FACULTY

STAFF

STUDENT

OTHER

PI/supervisor information, if applicable:

PI/SUPERVISOR NAME

PI/SUPERVISOR EMAIL

VENDOR INFORMATION

New Vendor

If this is the first time a vendor is submitting for payment, please complete a W9/W8 form and submit with invoice to your Senior Cluster Administrator. **Please allow additional processing time for new vendor requests.**

W9 FORM IF YOU ARE A U.S. CITIZEN OR PERMANENT RESIDENT

irs.gov/pub/irs-pdf/fw9.pdf

W8 FORM IF YOU ARE NOT A U.S. CITIZEN OR PERMANENT RESIDENT

irs.gov/pub/irs-pdf/fw8ben.pdf

Existing Vendor

VENDOR ID #:

(IF KNOWN)

CATEGORY CODE #

(IF KNOWN)

REQUEST TYPE

If none of the following options seem appropriate, please contact Anuj Goyal at ag3572@cumc.columbia.edu.

Consultant (Independent Contractor) - ☒ Requestor's Checklist

[SCOPE OF WORK](#)

[SERVICE COMPLIANCE CHECKLIST](#)

SOLE SOURCE QUESTIONS (PLEASE ANSWER QUESTIONS LISTED BELOW)

QUOTE

RESUME/CLIENT LIST/COMPANY BROCHURE

[INDEPENDENT CONTRACTOR CERTIFICATION](#)

CERTIFICATE OF INSURANCE – (REQUIRED IF VENDOR IS COMING ON-SITE/COLUMBIA)

Requisition Request Form (Purchase Order - PO)

Institutional Service Agreement - ✓ Requestor's Checklist

SCOPE OF WORK

SERVICE COMPLIANCE CHECKLIST

SOLE SOURCE QUESTIONS (PLEASE ANSWER QUESTIONS LISTED BELOW)

QUOTE (IF AVAILABLE)

Supplies Purchase - ✓ Requestor's Checklist

QUOTE

SOLE SOURCE QUESTIONS (PLEASE ANSWER QUESTIONS LISTED BELOW)

CERTIFICATE OF INSURANCE – (REQUIRED IF VENDOR IS COMING ON-SITE/COLUMBIA)

SHIPPING ADDRESS (IF NOT 722 W. 168TH STREET 15TH FLOOR):

SOLE SOURCE JUSTIFICATION QUESTIONS

1. What type of service/item are you requesting?

2. How will this service/item impact your work/research?

3. Why is this the only vendor that can be used?

4. Have you solicited quotes from other vendors? If yes, please attach.

YES

NO

5. Is this equipment under patent or does it have a proprietary design?

YES

NO

SCA USE ONLY

NAME

DEPT

PC BUS UNIT

PROJECT

PROJECT ACTIVITY

INITIATIVE

SEGMENT