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**UPDATE VENDOR MASTER**

**Procedure**

A detailed procedure for completing this form is located at [www.mycenterpointenergy.com/accountspayable/procedures/](http://www.mycenterpointenergy.com/accountspayable/procedures/)

under AP General Tips.

**Required information for vendor creation**

Before you complete a vendor creation request, you must acquire the following information from the vendor:

• The vendor's W-9

***Substitute:*** You may complete the W-9 on page 4 in lieu of the vendor providing one.

• The vendor's legal name (from W-9)

• The vendor's tax identification number (from W-9)

• The vendor's physical address

• The vendor's telephone number

• The vendor's fax or email address for receiving payment notifications

• The name and telephone of the vendor's financial contact (e.g., treasurer, AIR manager)

• The vendor's banking information:

-Bank name

-Country

- Routing number

- Account number

- Account holder

**D&B DUNS number**

Page 2 of this form requests a Dun and Bradstreet (D&B) DUNS number to expedite the vendor validation process. The Vendor Master Administrator verifies that each company has a DUNS number prior to creating the vendor. Providing the DUNS number up front decreases the turnaround time for maintenance.

**Banking information**

• All new vendors must provide banking information to allow for electronic payment. If a vendor requires payment by check, contact the Vendor Master hotline at (713) 207-7870 prior to requesting vendor creation.

• ACH is the preferred payment method. To have a vendor paid by wire, you must provide a specific business need in the

Additional Notes at the bottom of page 2.

**Vendor signature**

When requesting vendor creation, a signature from the vendor and the other information at the bottom of the W-9 on page 4 are required when:

• The vendor is completing the form

• The vendor is subject to backup withholding (see Certification Instructions on page 4)

**Before you begin**

Before you complete this form, you must have:

• For changes to a vendor:

- The SAP vendor number

- The SAP vendor name

• For creation of a new vendor:

- Identified that the vendor does not already exist in SAP

***Reference:*** See **Searching for a Vendor** at [www.mycenterpointenergy.com/accountspayable/procedures/](http://www.mycenterpointenergy.com/accountspayable/procedures/) under

AP General Tips.

- An electronic copy of the vendor's W-9 for attaching to the request, or the W-9 information to complete on page 4.

**Reactivating a vendor**

To request the reactivation of a vendor flagged for deletion or blocked from posting, you must complete the form and provide the

W-9 documentation as if you were requesting vendor creation.

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UPDATE VENDOR MASTER

0 CREATE 0CHANGE DDELETE

To acquire a New Vendor Request for the headquarters location, complete an additional form for each branch. Email completed form to [Vendor. Master@CenterPointEnergy.com.](mailto:Vendor.Master@CenterPointEnergy.com) For questions, contact the Vendor Master hotline at (713) 207-7870.

\*BOLD" denotes a required field for a new vendor request. Bold denotes a field required for any non-PO vendor maintenance.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| THIS TOP SECTION FOR CENTERPOINT ENERGY USE ONLY | | | | |
| IF CHANGE/DELETE/REACTIVATE,  CURRENT VENDOR NUMBER | \*VENDOR NAME\* (from W-9) | | | OLD VENDOR NAME (for name change) |
| \*REQUESTED BY\* | VENDOR DBA | | | CONFLICT OF INTEREST AGREEMENT (please check)  D I understand that any potential conflict of interest as set  forth by the CenterPoint *Standards of ConducVBusiness*  *Ethics Policy* has been approved by my management and reviewed by the Chief Ethics and Compliance Officer. |
| REQUESTOR PHONEIDATE IMANAGER'S NAME (for non-PO vendors) | | | | |
| MANAGER'S SIGNATURE (or CORJ' manager when emailing reguest to Vendor Master) | | | | |
| \*COMPANY CODE\* | | PURCHASING ORGANIZATION | \*INVOICEIAPPR IN WORKFLOW?\*  0NO 0YES, PROVIDE SAP DOCUMENT NUMBER (17xxxxxxxx) | |
| Company: Creating a new vendor in one of the following extends the vendor to the other eight: 0002, 0003, 0024, 0027, 0036, 0062, 0072, 0077, 0082 | | | | |
| PHYSICAL ADDRESS DATA | | | | |
| \*PHYSCIAL STREET ADDRESS\* I\*CITY\* | | | | |
| \*REGION (State)\* I\*POSTAL CODE\* !\*COUNTRY\* | | | | |

CONTROL DATA

\*TAX IDENTIFICATION NUMBER (attach W-9 or complete page 4)\* IDUNS NUMBER (See *O&B DUNS* number on page 1 for more information)

|  |  |
| --- | --- |
| VENDOR CONTACT INFOMATION | |
| \*TELEPHONE NUMBER (1)\* IEXT | TELEPHONE NUMBER (2) IEXT |
| \*FINANCIAL CONTACT PERSON (e.g., Treasurer, A/R Manager)\* | \*FAX OR EMAIL FOR PAYMENT NOTIFICATlON\* |
| \*FINANCIAL CONTACT PHONE\*  IEXT | FINANCIAL CONTACT EMAIL (for notifying vendor of data changes) |

See *Banking information* on page 1 for more information.

\*PAYMENT METHOD\*

DELECTRONIC ACH (preferable) O wRE

|  |  |
| --- | --- |
| BANKING INFORMATION | |
| \*BANK COUNTRY\* rROUTlNG NUMBER\* | \*ACCOUNT NUMBER\* rACCOUNTHOLDER NAME\* |
| \*BANK NAME\* | \*BANK CONTACT NAME\* I\*BANK CONTACT PHONE\* |

ADDITIONAL COMMENTS

CNP 474 (12-2013) Page 3 OF 4 **PURCHASING INFORMATION**

Complete this page only if you are a CenterPoint Energy Purchasing employee.

**ACCOUNT GROUP**

**D**ZPUR (Domestic) **D** MNFR (Manufacturer) **D**ZFOR (Foreign)

STREET ADDRESS OR P.O. BOX

**ORDERING ADDRESS (OA)**

'CITY

REGION (State) I POSTAL CODE ICOUNTRY

STREET ADDRESS OR P.O. BOX

**REMIT-TO-ADDRESS** (PI)

'CITY

REGION (State) IPOSTAL CODE ICOUNTRY

**MINORITY STATUS**

MINORITY INDICATOR IMINORITY CERTIFICATION DATE

**PURCHASING DATA**

ORDER CURRENCY ITERMS OF PAYMENT IINCOTERMS SALESPERSON ITELEPHONE IEMAIL

**D**GR-BASED INVOICE VERIFICATION **0** AUTOMATIC EVALUATED OR SETTLEMENT DEL.

**0**AUTOMATIC EVALUATED GR SETTLEMENT RET. **D**ACKNOWLEDGEMENT REQUIRED

Attach Automated Invoice Submittal Agreement as applicable.

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If you are requesting a new vendor complete this W- 9 or attach a W-9 to your request Detailed instructions are available at www irs gov

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Substitute for IRS form  **W-9** | **CenterPoint Energy**  **Request for Taxpayer**  **Identification Number and Certification** | | | | | | Give form to the requester. Do not send to the IRS. |
| Name (as shown on your income tax return) | | | | | | | |
| Business name, if different from above | | | | | | | |
| Check the appropriate box:  **D**Individual/Sole proprietor **D**Corporation **D**Partnership  **D**Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) \_  **D**Other (see instructions) | | | | | | **D**Exempt payee | |
| Address (number, street, and apt. or suite no.) | | | | | | Requester's name and address (optional) | |
| City, state, and ZIP code | | | | | |
| List account number(s) here (optional) | | | | | | | |
| Taxpayer Identification Number (TIN) | | | | | |  | |
| Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid  backup withholding. For individuals, this is your social security number (SSN). However, for a resident Social security number alien, sole proprietor, or disregarded entity, see the Part L instructions on page 3. For other entities, it is  your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3. I I  Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose Employer identification number to enter.  Employer identification number  I | | | | | | | |
| CERTl FICA TlON INSTRUCTlONS- You must cross out item 2 below if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting of interest or dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, the acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement account (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. | | | | | | | |
| SECTlON II- CERTIFICATlON  Under penalties of perjury, I certify that:  1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and  2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest and dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and  3. I am a U.S. person (including a U.S. resident alien).  The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding. | | | | | | | |
| Signature of U.S. person | | | | Date | | | |
| Name | | Title | Telephone number | | Fax number | | |