FIU FLORIDA INTERNATIONAL UNIVERSITY

Office of the Controller – Procurement Services

User Manual – Supplier Registration: US Companies and Individuals

A. Click on the registration link found <u>here</u> and the following screen will appear. Select **US Company** and select **Next** to continue.

<u>Note</u>: Fields marked with asterisks (*) are mandatory fields, which need to be filled out in order to move to the next screen.

—					
Welcome	Identifying Information	Addresses	Contacts	Payment Information	Submit
'elcome - Step 1 o	f 6			Exit	vious Next >
Dear Prospective Supp	lier:				
Thank you for your inte under "Supplier Portal"	rest in doing business with Florida I before proceeding with the applicat	nternational University. You ion. Note that your protecte	have reached our supplier d information is secure on t	application portal. Please review of this site.	our User Guides found here
Prospective suppliers r and Conditions have b FIU Standard Terms ar	nust agree to FIU's Standard Terms een accepted. In the event that an a nd Conditions and a contract can be	and Conditions found <u>here</u> greement has been reache signed to govern purchase	. Proposed terms and cond d regarding the proposed to s.	itions from suppliers will be review erms and conditions from a supplie	ed after the Standard Terms r, those will supersede the
To complete your regis answer your questions	tration, please complete all of the re as you move throughout the registra	quired fields that are indica ation process.	ted with an asterisk (*). The	ere are special icons located in eac	h section that will be able to
Use the navigation but information, proceed to normally approved with	tons "Next" and "Previous" to move o the "Submit" step where you may s nin 1-3 business days.	between steps or "Save for ubmit your application for c	Later" to save your work to consideration. You will recei	be resumed later. Once you have ve an email confirmation shortly af	provided all of the required ter submittal. Applications are
If you have any question	ons or feedback on the registration p	rocess, please contact Sup	plier Relations Team at Ver	ndors@fiu.edu.	
Required field					
Select an activity be	low: ⑦				
Start a new regist	tration form	do you raprosant?			
	What type of enuty	uo you represent:			
		any			
	OUS Citizen or	Resident			
	O Non-Resident	Individual			
	O Honorarium -	US Citizen/Resident (Not	for goods or services)		
	O Honorarium -	Non-Resident (Not for go	ods or services)		
○ Continue from w	nere you left				
				Evit / Dro	Next b

B. Fill in all the Identifying Information such as Supplier Information and Profile Questions in Step 2. Click on Add/ View Attachment for attaching the required W-9 (U.S. individuals and companies), W-8BEN (foreign individuals), W-8BEN-E (foreign companies), or W-8ECI (foreign companies with U.S. locations/offices) and other documents.

Welcome Identifying Inform	ation Address	es Contacts	Payment Information	Submit	
Identifying Information - Step 2 of 6		Exit	Save for Later	Next >	
A completed signed and dated W-9(USA), W-8 B signed W-9 and documentation of event.	EN-E (Foreign Company	/) or W-8 BEN (Non-Resident) is re-	quired to proceed with the registration. U	3 Citizen/Resident Honorarium reci	pients submit completed,
Supplier Information 💿					
* Employer ID Number	3048348348		Please attach W-9 form.		
* Supplier Name	US COMPANY		Add / View Attachment		
Doing Business As (if applicable)			Download W-9 form from IRS website		
Supplier Website			Open URL		
Classification	Company	\sim			
Profile Questions ⑦ * Are you currently working with an FIU dep providing services or coordinating to begin /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// /// // // // /// /// /// /// /// // // // // /// /// // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // // /	artment, either providing services?	Yes V Purchasing Services, John Doe	. 305-348-2000	€ E	
(A)	.::				
* Please select the annual household incor the company:	ne for the president of	\$100,000 and Over	Q		
* Please select your company's annual inco	me:	\$1,000,000 and Over	Q		
(A)					
What kind of services are being offered to the	ne university?	None of the Above	Q		
(J)					
* Please provide your Tax Classification:		S Corporation	٩		
	.::				

C. Attach a completed, signed, and dated **W-9** (U.S. individuals and companies), **W-8BEN** (foreign individuals), **W-8BEN-E** (foreign companies), or **W-8ECI** (foreign companies with U.S. locations/offices). Type in the **Attachment Description** for the document and click **Return** to continue answering all **Profile Questions**.

Add Att	achment			
Attachm	ents			
≕ , 0	λ			4 1-1 of 1 🗸 🕨 🕨
	Attached File	Attachment Description	Upload	View
	1 Signed_W9_Tax_Form.pdf	COMPANY W9 FORM	Upload	View + -
6	Return			

D. Select whether you are currently working with an FIU department by clicking on the **drop down** menu and select "*Yes*" or "*No*". If yes, enter the FIU department name, individual contact and phone number in the follow question.

ofile Questions ()	
 Are you currently working with an FIU department, either providing services or coordinating to begin providing services? 	
	No
Ø	Yes
If YES, to Question 1 above, outline FIU department name, individual contact name and phone number.	الع ii.
2 2	

E. Select the annual household income for the president of the company by clicking on the **Search** Icon and selecting an option from the list. If necessary, you may select "*Prefer not to answer*".

ase select the annual household income for the president of ompany:	٩	

	Look Up List	<
Question ID List Line Number	= ~	
List Item	begins with 🗸	
Search	ar Cancel Basic Lookup	
Search Results		
View 100 🛛 🔍 🔌	1-8 of 6 🗸 🕨 🕨	
List Line Number	List Item	
1	\$100,000 and Over	
2	\$75,000 - \$99,999	
3	\$50,000 - \$74,999	
4	\$25,000 - \$49,999	
5	Below \$25,000	
6	Prefer Not To Answer	

F. Select the company's annual income by clicking on the **Search** Icon and selecting an option from the list. If necessary, you may select "*Prefer not to answer*".

* Please select your company's annual income:	Q
.i.	

	Look Up List ×
Question ID List Line Number	= 🗸
List Item	begins with 🗸
Search Clea	r Cancel Basic Lookup
Search Results	
View 100 🗐 🖣	1-5 of 5 🗸 🕨 🕨
List Line Number	List Item
1	\$1,000,000 and Over
2	\$500,000 - \$999,999
3	\$250,000 - \$499,999
4	Below \$250,000
5	Prefer Not To Answer

G. Select the kind of services being offered to the university by clicking on the **Search** Icon and selecting from the available options. If the kind of services you are offering is not listed, select "*None of the Above*".

What kind of services are being offered to the university?		Q	
(Z	:		

Question ID 26 List Line Number = List Item begins with Search Clear Clear Cancel Basic Lookup Search Results View 100 I 1 Legal Services 2 Medical Services 3 Rental Services 4 Royalty License 5 None of the Above		Look Up List	3	×
List Item begins with Search Clear Cancel Basic Lookup Search Results View 100 1 1-5 of 5 List Line Number List Item List Line Number List Item List Line Number Address Clear Rental Services Rental Services None of the Above	Question ID List Line Number =	26	l	
Search Clear Cancel Basic Lookup Search Results View 100 I -5 of 5 Image: Second	List Item b	egins with 🗸		
View 100 Image: Text state in the sta	Search Clear	Cancel Basic Lo	pokup	
List Line NumberList Item1Legal Services2Medical Services3Rental Services4Royalty License5None of the Above	View 100	1-5 of 5 🗸 🕨 🕨		
1Legal Services2Medical Services3Rental Services4Royalty License5None of the Above	List Line Number	List Item		
2Medical Services3Rental Services4Royalty License5None of the Above	1	Legal Services		
3Rental Services4Royalty License5None of the Above	2	Medical Services		
4 Royalty License 5 None of the Above	3	Rental Services		
5 None of the Above	4	Royalty License		
	5	None of the Above		

H. Select your tax classification by clicking on the **Search** Icon and selecting from the available options.

• F	Please provide your Tax Classification:	Q]
			-
2		-	

	Look Up List ×
Question II List Line Numbe List Iten	D 29
Search	Cancel Basic Lookup
Search Results View 100	I • • 1-9 of 9 > > >
List Line Number	List Item
1	Individual/Sole Proprietor or Single Member LLC
2	C Corporation
3	S Corporation
4	Partnership
5	Trust/Estate
6	Limited Liability - C Corporation
7	Limited Liability - S Corporation
8	Limited Liability - Partnership
9	Other

I. Select the number of months/years you have done business with the State of Florida by clicking on the **Search** Icon and selecting from the available options. Select *N/A or No* if you have not done business with the State of Florida in the past.

111

	Look Up List	×
Question ID List Line Number = List Item be	egins with	
Search Clear Search Results View 100 H 4	Cancel Basic Lo	okup
List Line Number	List Item	
1	N/A (or No)	
2	0-12 months	
3	12-18 months	
4	18-24 months	
5	2-5 years	
6	More than 5 years	

J. Select the number of months/years you have done business with a Florida County by clicking on the **Search** Icon and selecting from the available options. Select *N/A or No* if you have not done business with a Florida County in the past.

* Please select N/A or No if you have not done business with a Florida county in the past. If Yes, select the number of months/years since you have done business with Florida county.		٩]
ـــــــــــــــــــــــــــــــــــــ	1		

	Look Up List	×
Question ID List Line Number =	30	
List Item be	egins with 🗸	
Search Clear	Cancel Basic Lo	pokup
View 100 🛛 🔄 🤞	1-8 of 6 🗸 🕨 🕨	
List Line Number	List Item	
1	N/A (or No)	
2	0-12 months	
3	12-18 months	
4	18-24 months	
5	2-5 years	
6	More than 5 years	

K. Select an NIGP code by clicking on the Search Icon. You can search for NIGP codes with keywords such as "Software", "Consulting", "Education" or "Services" under Description. Use keywords that best describes the services being offered. You may toggle between "begins with" and "contains" in the drop down menu. Note: If you are using a NIGP code that ends with "00", do not enter the last 2 zeros. The following website is available to help suppliers with entering their relevant <u>NIGP</u> codes.

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NIGP Code 1* Description* 1 Q	₿ Q			I4	► View All
1 9		NIGP Code 1	Description		
	1	٩			+ -



NIGP Examples:

Category	Description	Category	Description
92419	Educational Research Services	91832	Consulting Services (Not Other
97225	Lecturers Higher Education	91842	Engineering Consulting
92418	Educational Services\ Alternat	91843	Environmental Consulting
20837	Database Software	91871	IT Consulting
92045	Software Maintenance/Support	91874	Legal Consulting
92046	Software Updating Services	91875	Management Consulting
91806	Administrative Consulting	91876	Marketing Consulting
96258	Professional Services	91882	Scientific/Tech Consulting
96201	Freight Charges	91895	Telecommunications Consulting
92051	Software License	91052	Maintenance and Service Repair
95635	Internet Database Subscription	49043	Laboratory and Scientific Equipment
92419	Educational Research Services	92478	Teaching and Instruction Services
96900	Professional Services Higher Ed	91501	Advertising Agency Services
17553	Lab Supplies Non-Chemical	92400	Educational/Training Services

L. Select an NAICS Code by clicking on the **Search** Icon. You can search for NAICS codes with keywords such as "Services" or "Support" under **Description**. Use keywords that best describes the services being offered. You may toggle between "begins with" and "contains" in the drop down menu. The following website is available to help suppliers with entering their relevant **NAICS** codes. **NAICS Codes are OPTIONAL**.

US - NAICS Codes	Description					
٩				Î		
Add SIC Code						
Look Up Stand	ard Industry Code	×	Look Up S	Standard Indu	stry Code	×
Look Up Stand	ard Industry Code	×	Look Up S	Standard Indu	ustry Code	×
Look Up Stand SIC Code Type andard Industry Code begi	ard Industry Code US - NAICS Codes	×	Look Up SIC Code Type Standard Industry Code	Standard Indu	US - NAICS Codes	×
Look Up Stand SIC Code Type andard Industry Code begin Description contri	uS - NAICS Codes	×	Look Up SIC Code Type Standard Industry Code Description	Standard Indu	US - NAICS Codes	×

NAICS			
Code	Description	NAICS Code	Description
561	Administrative and Support Ser	72	Accommodation and Foodservices
56	Administrative and Support, Wa	5614	Business Support Services
541612	Human Resources Consulting Services	51421	Data Processing Services
541613	Marketing Consulting Services	56141	Document Preparation Services
56199	All Other Support Services	54134	Drafting Services
5614	Business Support Services	61	Educational Services
541330	Engineering Services	611	Educational Services
541310	Architectural Services	6117	Educational Support Services
5612	Facilities Support Services	61171	Educational Support Services
56121	Facilities Support Services	56133	Employee Leasing Services
56149	Other Business Support Service	5613	Employment Services
813910	Business Associations	5411	Legal Services
813920	Professional Organizations	54143	Graphic Design Services
541519	Other Computer Related Services	5141	Information Services
722320	Caterers	532	Rental and Leasing Services
5619	Other Support Services	541214	Payroll Services
54161	Management Consulting Services	5611	Office Administrative Services
	Hotels (except Casino Hotels) and		
721110	Motels	541219	Other Accounting Services
72233	Mobile Foodservices	51419	Other Information Services

NAICS Examples:

M. Select your Certification Source by clicking on the **Search** Icon and selecting from the available options.

Certification ⑦	
HUBZone Program	×
Size of Small Business	×
* Certification Source	Q
* Government Classification	Q

Sear	ch Clear C	Basic Lookup	
Search View 1	Results 00 ii ii	1-4 of 4 🗸 🕨 🕨	
SetID	Certification Source	Description	
FIU01	CERTIFIED	Certified MBE	
FIU01	NONCMBE	Non Certified MBE	
FIU01	NONMBE	Non MBE	
FIU01	NONPROFITO	Non-Profit Organization	

Please be sure to select the proper classification when completing the Application.

- **Certified MBE:** A minority business enterprise that is certified as an MBE by the state of Florida.
- Non-MBE: A non-minority business enterprise or individual.
- **Non-Certified MBE:** A minority business enterprise that is not certified as an MBE with the state of Florida or an individual that is

If you are a Certified Minority Business Enterprise, you will need to attach your certification by clicking on Add/ View Attachments and enter the certification expiration date by clicking on the Calendar Icon.

Certification ⑦		
HUBZone Program Size of Small Business	×	Please attach Certification. Add / View Attachments
* Certification Source	CERTIFIED Q Certified MBE	Certificate Expiration
* Government Classification	Q	

N. Select your Government Classification by clicking on the **Search** Icon and selecting from the available options.

Certification (Ð		
н	JBZon	e Program	~
Size of	Small	Business	
* Certi	* Certification Source		ABE Q Non MBE
* Governme	nt Clas	sification	Q
		Look Up * Govern	ment Classification ×
	6	•	ter with and 1
	Goven	nment classification beg	
		Description beg	ins with 🗸
	Sear	ch Clear Cancel	Basic Lookup
	Search	Results	
	View 1	00	4 4 1-15 of 15 🗸 🕨
	SetID	Government Classification	Description
	FIU01	AFRICANAMR	African American
	FIU01	AMERIWOMAN	American Women
	FIU01	ASIANHAWAI	Asian-Hawaiian
	FIU01	DISABLEDVE	Disabled Veteran
	FIU01	GOVAGENCY	Government Agency
	FIU01	HISPANIC	Hispanic
	FIU01	NATIVEAMER	Native American
	FIU01	NONMINORIT	Non-Minority
	FIU01	NONPROFMB	Non-Profit Minority Board
	FIU01	NONPROFMCS	Non-Profit Minority Community Served
	FIU01	NONPROFME	Non-Profit Minority Employees
	FIU01	NONPROFORG	Non-Profit Organization
	FIU01	PRIDE	PRIDE
	FIU01	SMBUSFED	Small Business Federal
	FIU01	SMBUSST	Small Business State

O. Once Step 2 is completed, click on **Next** to proceed to Step 3: **Addresses** tab. (Comments are **OPTIONAL**)

Size of Small Business		~	
* Certification Source	NONCMBE	Q Non Certified MBE	
* Government Classification	NONMINORIT	Q Non-Minority	
omments ⑦			 e e e e e e e e e e e e e e e e e e e

P. In Step 3, fill in the **Primary Address** and **Primary Email**. If the *Remit To Address, Ordering Address*, and *Invoice Address* are different than the Primary Address, then provide those addresses as well. Click Next to proceed to Contacts.

Welcome	Identifying Information	Addresses	Contacts	Payment Information	on Submit
			Exit	Save for Later	Previous Next
ddresses - Step 3	of 6				
Other Addresses: Check I	hoves below to indicate addresses	that are different from your P	rimary Address above		
Invoice Address: Address	from which you will receive invoice	s from us, if we are billing yo	u.		
Primary Address 🕐]	
* Country	USA Q United States				
Address 1	11200 SW 8th Street				
Address 2					
Address 3					
City					
County	Miami				
County	Miami-Dade	Postal 33199-2516			
State	FL Q Florida				
* Primary Email	SAMPLE@COMPANY.COM				
				J	
Other Addresses					
Check hoves below t	o indicate addresses that are differ	ant from your Drimany Addres	s shove:		
Check boxes below t	o indicate addresses that are differen	ant nom your Primary Addres	s above.		
Bemit To Address					
Address for remitting	j payment				
_					
Ordering Address Address for shipping (noods/service				
, address for emplying g	9000001100				
Invoice Address	au aand invaica				
Address from which y	ou sena invoice				
			E14	Cause familiator	(Draviaua) Neut
			Exit	Save for Later	Previous Next Next

Q. In Step 4, click on Add Contact to fill in the Contact Information and Password. This Password will be used to access your supplier portal and to make any changes to your profile. Click Next to proceed or click Add Contact to add another contact.

=					
Welcome	Identifying Information	Addresses	Contacts	Payment Information	Submit
Contacts - Step 4 of	of 6		Exit	Save for Later Prev	vious Next >
Contacts ⑦ You have not added	any contact information to your app	ication. Click "Add Contact	" button to add new contact i	nformation.	
Add Contact					
* Required field			Exit	Save for Later	evious Next >
udd Contacts					
du contacts					
Contact Information	on (?				
* First Name	ROARY		Primary Con	act	

* Last Name	PANTHER	
Title		
*Email Address	ROARY@PANTHER.COM	
* Telephone	3053482000	Ext
Fax Number		
* Contact Type	General	~
Password	•••••	*Password is to access your supplier portal. *It must be 8 to 20 characters, must contain
Confirm Password		least 1 upper case letter, 1 lower case letter and 1 number and may only use these characters @ #*() + = (1/2) -

	Welcome	Identifying Information	Addresses	Contacts	Payment Information	Submit
Con	tacts - Step 4 of	6		Exit	Save for Later	Next >
Co	ntacts (?)					
_	Primary	Name		Phone	Designate Address	
	۲	SAMPLE COMPANY		305/348-2000	Primary Address V	
* Re	quired field			Exit	Save for Later	Next >

R. In Step 5, the supplier must complete **Payment Information**. On this page, choose either **Electronic Fund Transfer or Single Use Account (SUA)** as your payment method. For **Electronic Fund Transfer**, the *Bank Name*, *Routing Number*, and *Bank Account Number* are required fields. Click **Next** to proceed to last step.

			-		
Welcome	Identifying Information	Addresses	Contacts	Payment Information	Submit
Payment Information	n - Step 5 of 6		Exit	Save for Later Previous	Next >
Fuyment Freierences ()					
Requested Pa	ayment Terms 00 Due	Immed	Single Use Acc	count	
E	mail Address SAMPLE@COM	IPANY.COM	The University recommends participation in our SUA Program; enrollment will allow us to remit payment to you faster via single use credit cards. Please note that you must be able to accept credit card payment if you select this option and there is a fee associated with this option.		Program; via able
*Payr	ment Method Single User Ac	count 🗸			and
	Enable Email	I Payment Advice		For more information click here. Clic	k Here
*Required Field			Exit	Save for Later	s Next ▶

	-					
Welcome	Identifying Infor	rmation Addresses	Contacts	Payment Inform	ation Submit	
Payment Informatio	on - Step 5 of 6		Exit	Save for Later	Previous	ext 🕨
Payment Preferences 🕐						
Requested	Payment Terms 01	Net30				
	Email Address SA	AMPLE@COMPANY.COM				
*P	ayment Method E	ectronic Funds Transfer	~			
		Enable Email Payment Advice	e			
Supplier Banking Inforr	mation ⑦ Cou *Bank N Bank ID Qua	untry USA United States Name SAMPLE BANK	*/	Account Type Check Acct	~	
	*Bar	nk ID 348348348				
	*Bank Account Nur	mber 11111111111111111				
*Required Field			Exit	Save for Later	< Previous N	lext ⊧

S. The final page in the registration process is the **Submit** page. Here an **email address** is required. The registrant must agree to FIU's Standard terms and conditions by checking the box. Finally, **click** the **Submit** button.

Welcome	Identifying Information	Addresses	Contacts	Payment Information	Submit
			Exit	Save for Later Image: Save for Later	ious Next →
Submit - Step 6 of 6	i				
Click the "Review" button to	o review the registration information	۱.			
Click the "Submit" button to	submit your registration after revie	ewing and accepting followi	ng Terms of Agreement .		
Email communication rega	rding this registration will be sent to				
Towns and Condition	- @				
Terms and Condition	IS (?)				
Make sure you r	ead terms of agreement fully befor	e submitting your registratio	on.		
I hereby consen	t to the use of the SSN or EIN prov	ided herein for verification	of compliance with state and	tederal regulations.	
All suppliers and daily virtual perm	contractors conducting business o it, or a 30 day virtual permit. For m	n campus are required to e ore information, please visi	ither purchase a staff virtual it	permit (at the lowest staff rate), a	
Supplier Parking					
I certify that the in business with Flo	formation supplied herein, includin rida International University, I or m	g all attachments, is correc organization is compliance	t to the best of my knowledge e with Chapter 112, Florida S	 I further certify that in doing tatutes, conflict of interest, and that 	
I have disclosed t its branches. I fur	he name of any FIU employee who ther certify that I am not an employ	o owns, directly or indirectly ee of Florida International (, an interest of 5% or more in University.	the above organization or any of	
FIU's Standard Te	rms and Conditions				
By submitting this	application to be a registered sup	plier with FIU, the supplier I	hereby agrees to FIU's Stand	ard Terms and Conditions, as they	
contained therein	he supplier represents that the sup , and that such terms and condition	oplier has had the opportun is shall govern the supplier	ity to review and agrees to al 's resulting relationship with F	ide by all the terms and conditions IU.	
Review	SUDMIT				
			Exit	Save for Later	vious Next ≽

T. The supplier will receive an email confirming the receipt of their application. It will include a **USER ID** Number which will be used so they can login and make changes.

Your Recent Supplier Registration
Your supplier registration application, Registration ID 0000008882, has been accepted. The following Supplier ID has been created for you:
Supplier Name: SAMPLE COMPANY Supplier ID: 0000047795
User ID: SUP0000047795
Your Supplier ID will be active in the system after one business day. You will need your User ID to access the Supplier Change Request page. Please remember the password that was entered at the time of registration. If you forget your password, click on the "Forgot Password" link and follow the directions. If you have any questions or feedback regarding your Supplier ID, please contact Procurement Services by emailing <u>vendors@fiu.edu</u> .
Click on the link to access Supplier Portal
https://pslinks.fiu.edu/psc/psfssup/SUPPLIER/ERP/c/NUI_FRAMEWORK.PT_LANDINGPAGE.GBL
Thank you,
FIU Procurement Services

U. The FIU Procurement department has Registration Approvers who conduct a **two-step** review of the supplier registration information in PantherSoft Financials. There is an **initial review** for completeness. Next, the **details** of the application are verified. Then the registration will be forwarded for final authorization to a **Supplier Approver**. The **Supplier ID** will be issued after the review of the application.