**Maritime and Coastguard Agency**

**New Supplier Details for Finance System**

Please complete this form as fully as possible to facilitate adding you as a supplier to our payment system (subject to verification):

|  |  |
| --- | --- |
| Company name |  |
| Company address(please include post code) |  |
| Company accounts address (if different) |  |
| Company telephone no. |  |
| Generic e-mail (for remittance advice) |  |
| Company web-site address |  |
| Contact name |  |
| Contact title/position |  |
| Contact telephone no. |  |
| Contact mobile no. |  |
| Contact e-mail |  |
| Company registration no. |  |
| VAT no. |  |
| CIS registered - Yes/No |  |
| UTR if CIS registered |  |
| Bank – Name on Account |  |
| Bank – Account No. |  |
| Bank – Sort Code |  |
| Company business description (brief outline) |  |
| Are you a Crown Commercial Service supplier?If so, please advise which framework/s you are on. |  |