|  |  |  |
| --- | --- | --- |
| SECTION 1 (For internal use only) UN INFORMATION | | |
| **Requesting Person (UN)**  First Name / Last Name / Extension | **Date** (dd-mm-yy) | **Atlas Vendor No.:** |
| **Type of Update for Atlas**  create change  inactivate | **UN Index No.:** |
| VENDOR TYPE | | |
| STAFF  ALD  SSA  SC Holder  Meeting Participant  Fellow  Supplier  Other | | |

### *Complete either section 2 or section 3 (not both)*

|  |  |  |  |
| --- | --- | --- | --- |
| SECTION 2 PERSON INFORMATION (For Individuals Only) | | | |
| Family Name / LAST NAME / Surname | | First Name(s) / Given Name(s) | |
| Birth date (dd-mm-yyyy) | Birth place (City, Country) | Current Nationality | Sex Male  Female |
| Address | | | |
| City State/Province Postal Code (Zip) Country | | | |
| E-mail Address | | Telephone Number Fax Number | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| SECTION 3 SUPPLIER INFORMATION (For Companies Only) | | | | | |
| Company Name | | Parent Company Name (if applicable) | | Web Site URL (if applicable) | |
| MAIN Street Address | | | SECOND Street Address (If 2nd address, provide purpose) | | |
| City State/Province Postal Code (Zip) | | | City State/Province Postal Code | | |
| Country | | | Country | | |
| Contact Person  Name  Title | Phone | | Alternate Contact Person  Name  Title | | Phone |
| E-mail Address | Fax | | E-mail Address | | Fax |

|  |  |  |
| --- | --- | --- |
| SECTION 4 BANKING INFORMATION (For additional Bank Accounts, please make additional copies of the form) | | |
| Name of Banking Institution (as it appears on the bank statement) | Beneficiary Name of Account (Name as it appears on account) | |
| Street Address | Branch Name | Phone |
| City State/Province Postal Code (Zip) Country | | |
| Bank wire-transfer code information | | |
| Bank Account Number (enter with no punctuation, no dots, dashes or spaces) | Account Type  Checking  Savings  Other | |
| Bank ID (ex for Canadian Bank 9 digit Routing No, or for AUS the BSB No.)  For US banks only (No., 9 digits): ACH  ABA / Fed Wire | SWIFT/BIC Code, 8 or 11 digits (not applicable to US banks) | |
| Branch ID (if applicable – for CAN use Transit code) | |
| IBAN (Required for European banks) | Bank Account Currency  USD  Other: (Please specify) | |
| Currency of Payment  USD  Other: (Please specify) | |
| Bank wire-transfer code information for Intermediary Bank\*, if applicable | | |
| Name of Intermediary Bank (as it appears on the bank statement) | Address of Intermediary Bank | |
| For US banks only (No., 9 digits): ACH  ABA / Fed Wire | SWIFT/BIC Code | |
| Bank Account No. (of the beneficiary bank with the intermediary bank) (enter with no punctuation, no dots, dashes or spaces) | | |
| **Incomplete or erroneous information will prevent final credit of payments to your account** | | | | |

**NAME**       **STAMP**

**TITLE**       **SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**