Generac Mexico New Vendor Profile / Change Request



If this is a Change Request, the Generac Request Initiator must complete this section. Vendor number(s) and company code(s) will be entered by Generac personnel.									
Main Vendor (VN / PR) #:					Invoicing Party (PI / EF) #:				
Company Code(s):	☐ 2001 Generac México, S.A de CV					☐ 2004 Operadora Selmec, S.A. de CV			
	2005 Servicios Administrativos					☐ 2007 Generac Hidalgo S.A. de CV			
	Other:								
New Request - complete all sections					☐ Change Request				
IMPORTANT NOTE: Name and Tax ID changes are not accepted and a new vendor is required.									
Name Information									
Formal Busi	ness Name) :							
Alternate Na	me:								
Current Tax Identification Copy Required:			RFC Certificate (Mexico)			Foreign Tax Number (Non-Mexico)			
Facility Address Details									
Street Address:									
District / County:					City:				
Region / Sta	te:		Postal / Zip Code:				Country:		
PO Box Number: PO Bo			ox City:	City: PO Box Region / State:) :	PO Box Postal / Zip Code:	
Payment Address Details									
Check one: Same as Facility Address					☐ Use information provided below				
Street Address:									
District / County:					City:				
Region / State:				Postal / Zip Code:				Country:	
PO Box Number: PO		РО	Box City:	PO Box Region / State:			e:	PO Box Postal / Zip Code:	

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Purchase Order Contact Information Contact Name: Contact Title: Single Email Address for receiving Purchase Orders: Telephone: **Extension: Payment Contact Information Contact Name: Contact Title: Payment Notification Email Address:** Telephone: Extension: Payment Details - REQUIRED Payment Terms (in number of days) Payment Currency Mexico Vendor: Enter Currency: ___ Non-Mexico Vendor: Payment Method will always be Wire Transfer For Wire Transfer payment method, please complete the Generac Mexico Vendor Banking Information form at: www.generac.com/about-us/supplier-support **Invoice Email Remittance Information** Generac México, S.A de CV, Operadora Selmec, S.A. de CV, **Company Doing Business With:** Servicios Administrativos, or Generac Hidalgo S.A. de CV **Send Invoices To:** buzoncfdi@generac.com **Payment Inquiries:** dudaspagos@generac.com **Vendor Signature - REQUIRED** Title Signature **Print Name** Date **Generac Signatures - REQUIRED Print Name** Title Signature Date **Vendor Request Initiator: Initiator's Supervisor: Generac Finance Review - REQUIRED** Title **Print Name** Signature Date **Financial Management:** Financial Management Title: Director of FP, A & T ☐ Director Comptrollership ☐ CFO

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