


# New Business Supplier Form



Use this form to enable a direct credit payment to be made to your nominated account following receipt of an invoice. Please complete all details below.

 You need to attach an authorised bank document which includes the bank logo, account name, and account number. Overseas vendors need to provide a SWIFT/IBAN number.

**1** New Zealand GST Number (if applicable)

OR

Australian Business Number (if applicable)

**2** Company name:

Trading as:

**3** Address as per invoice: (Ensure this matches the invoice address)

Street address

Suburb

City

Country  Postcode

**PO Box details (if applicable):**

PO Box  City  Postcode

**4** Contact details:

Business phone  Mobile

Purchase Order email

Remittance email

**Send the completed form and supporting documents to:**

- veterans@nzdf.mil.nz, or
- Veterans' Affairs, PO Box 5146, Wellington 6140.