

Vendor Management

Vendor Name: _____

Address: _____

Address2: _____

City: _____

State: _____

Zip Code: _____

Main Telephone: _____

Years In Business: _____

Nature of Business: _____

References (Other Companies) 1. _____

2. _____

3. _____

(SOC - 1/ SOC - 2) Compliant (YES/NO): _____ Year: _____

Latest SOC Report Available (YES/NO): _____ Year: _____

GDPR Compliant (YES/NO): _____ Year: _____

Latest GDPR Compliance Report Available (YES/NO) _____ Year: _____

*** Please Attach SOC/SOC2, GDPR & W-9 Report with this form– Thanks ***

NOTE: Only submit W-9 if this was never submitted before.

Billing Method : 1. Invoice: (YES/NO) _____

2. P/O (Purchase Order): (YES/NO) _____

Contract Agreement

Hardware (YES/NO) _____ Software (YES/NO) _____ Service (YES/NO) _____

List Hardware:

1. _____ : Serial # _____ Quantity _____

2. _____ : Serial # _____ Quantity _____

3. _____ : Serial # _____ Quantity _____

List Software:

1. _____ : Serial # _____ Quantity _____

2. _____ : Serial # _____ Quantity _____

OR:

Service Provided to ASIC: _____

ASIC Account Number: _____

Enter Customer Representative Contact Information Below:

Name: _____ Title: _____

Office Tel#: _____ Cell#: _____

Vendor Service Management Contact:

Support Tel: _____

Hours Available(24/7;9AM-5PM etc.): _____

Does Support require a ticket to be opened? (YES/NO) : _____

What is your Support Website URL?: _____

Can a Direct Call be made to Support in an emergency? (YES/NO): _____

Will you provide and SOW for Project Management?:(YES/NO): _____

Do you accept SLA's from Customers Verbal or Written? (YES/NO): _____

Explain how a defective product (hardware /software is remedied :

What is your Delivery Window from the time the contract is signed, and what's your expectation of the Customer if the deadline is not meet?:

Contract Information

Contract Date: _____

Length of Contract: _____

Renewal Date : _____

Renewed (YES/NO): _____ If not renewed give the reason: _____

Product Cost: _____

Discount % _____

Negotiated Price (locked in): _____

Contract Signed: (YES/NO) _____

Vendor Rep Name: _____

ASIC Rep Name: _____

Title: _____ Date: ____ / ____ / _____

Title: _____ Date: ____ / ____ / _____

Signature: _____

Signature: _____