

Supplier Master Data Form

Supplier details	
Supplier Name:*	
SITA Supplier ID (be filled by SITA)	
Tax country	
Tax Registration Number*	
Taxpayer Id*	
Supplier Registered Address	
SITA Address ID (be filled by SITA)	
Address Line 1: Street name and number*	
Address Line 2	
Address Line 3	
Address Line 4	
City / Town / Locality*	
Province / State / County / Borough*	
ZIP / Postal Code*	
Country*	
Supplier Delivery Contact (Account Manager for SITA)	
Contact Name*	
Contact Job Title / Department	
Contact Phone Number*	
Contact Email Address*	
Email Address for sending PO*	
Sending PO Email Address Explanation	
	Payment Details & Contact
Payment Method*	Bank Tranfer
Payment Terms*	45 Days Net
Factoring	No
Account Receivable Contact	
Account Receivable Contact Phone Number	
Remittance Email Address*	
Remittance Email Address Explanation	
•	e attach the proof you owned the bank account)
Payment Currency*	
Bank Country* Bank Country Explanation	
Bank Name*	
Bank BIC/SWIFT Code*	
Bank Number*	
Bank Branch Name	
Bank Branch Number	
Sort Code / Transit number / ABA Code /	
Clearing number	
Bank Account Number*	
IBAN Number*	
Bank Account Holder Name*	
Bank Account Holder Name Explanation	
Dank / 1000ank / 101a0/ 11amo Explanation	
Bank Postal Address*	
	Confirmation
To ensure payments can be remitted in a timely manner, please refer to SITA Supplier Guidelines (click on the link below to	
see them) and confirm that your company can comply with them.	
,, , , ,	SITA Supplier Guidelines
We acknowledge and will comply*	