



THE RITZ - CARLTON YACHT COLLECTION

Greetings. We welcome you The Ritz-Carlton Yacht Collection and look forward to doing business with you. In order to process your invoices for payment in a timely manner, we need for you to complete the Vendor Registration Form and follow our instructions:

For US vendors and suppliers, please complete the attached W-9 and Vendor Registration Form and email both forms to AccountsPayable@ritz-carltonyachtcollection.com. If you do not send the W-9 and Vendor Registration Form then we cannot process your invoice for payment.

For Vendors and suppliers outside of the US, please complete the attached appropriate W-8 and Vendor Registration Form and email both forms to AccountsPayable@ritz-carltonyachtcollection.com. If you do not send the appropriate W-8 and Vendor Registration Form then we cannot process your invoice for payment.

If you have any questions or need assistance on how to fill any of the documents, please e-mail AccountsPayable@ritz-carltonyachtcollection.com and we will happily guide you through the process.

To process your invoice for payment, email your invoice to the person you are doing business with and AccountsPayable@ritz-carltonyachtcollection.com. The invoice must be emailed to both locations in order for us to process your invoice for payment.

Vendor Registration Form

Address and Contact Information

Today's Date*

Legal Name of Company*

DBA Name

Other Company Names or Related Companies

US Tax Identification Number*

VAT/GST Number (Non-US Vendors only)*

Registered Country*

Payment Currency (USD/EURO/GBP)*

Phone Number (Include country code)*

Type of Business (Individual, Contractor, Partnership, Limited Liability Company, Corporation, etc.)

Address*

Address 2

City*

State*



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Country*

Zip or Postal Code*

Business Contact Information

Primary Contact Name*

Contact Email Address*

Contact Phone Number*

Billing/Payment/Remittance Information

Remittance Mailing Address (If different than above)*

Remittance Mailing Address 2

City *

State*

Country*

Zip or Postal Code*

Primary Contact Name*

Contact Email Address*

Contact Phone Number*

Payment Terms (ex Net 30)

Discount Terms

Banking Information

Beneficiary Account Name (If different than above)

Bank Name*

Bank Address*

Bank Account Number or IBAN*

Routing Code/Sort Code*

Swift Code*

Bank Account Currency

Intermediary Bank Name (if applicable)

Intermediary Bank Address (Complete with City and Country)

Intermediary Bank Swift Code

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Support Documentation

Attach one of the following as supporting documentation:

- Invoice that includes banking information
- Banking instructions on company letterhead
- Bank letter with banking information

Supplier Approval

Authorized representative of the company certifies that the information provided on this form is correct.

Print Name*

Title*

Signature*

Below To Be Completed By RCYC

Requesting Business Department Attests Verification

Form MUST be signed by Requesting Business Department (Manager or above) which will serve as confirmation that a call to the vendor was performed to obtain validation of the bank details listed above.

Print Name*

Department and Title*

Signature*

Primary Legal Entity to be used*



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Accounts Payable Attests Verification

Form MUST be signed by Accounts Payable which will serve as confirmation that the vendor's tax ID was checked with a third party source to ensure authenticity of the vendor, and the form was reviewed against third party supporting documents to ensure the accuracy of banking information and lastly, that the Accounts Payable input vendor information into ERP system for vendor setup.

Print Name*

Signature*

Treasury Attests Verification

Form MUST be signed by Treasury which will serve as confirmation that, prior to activating the vendor in ERP and banking systems, the department reviewed vendor information input into both systems by the Accounts Payable department, ensuring that it matches exactly what is on the vendor Authorization Form sent directly by the business.

Print Name*

Signature*

RCYC Preferred Bank to be used*

Other Information

Please include any other information.

- Denotes mandatory fields