



Supplier Onboarding/Registration –Manual

A. The prospective supplier needs to complete the online registration using **Supplier Registration portal**

https://pslinks.fiu.edu/psc/psfssup/SUPPLIER/ERP/c/NUI_FRAMEWORK.PT_LANDINGPAGE.GBL .

However, in the event of a systemic or connectivity error, the vendor can be added manually into the system.

- B. Fill in all the **required** fields. Attach a completed, signed, and dated **W-9** (U.S. individuals and companies), **W-8BEN** (foreign individuals), **W-8BEN-E** (foreign companies), or **W-8ECI** (foreign companies with U.S. locations/offices), and if applicable, a certification document for a minority business enterprise that is certified as an MBE by the state of Florida or a certifying agency.

Welcome Identifying Information Addresses Contacts Payment Information Submit

Exit Save for Later Previous Next

Identifying Information - Step 2 of 6

A completed signed and dated W-9(USA), W-8 BEN-E (Foreign Company) or W-8 BEN (Non-Resident) is required to proceed with the registration. US Citizen/Resident Honorarium recipients submit completed, signed W-9 and documentation of event.

Supplier Information ?

* Employer ID Number 348348348 [Please attach W-9 form.](#)

* Supplier Name SAMPLE COMPANY [Add / View Attachment](#)

Doing Business As (if applicable) [Download W-9 form from IRS website](#)

Supplier Website [Open URL](#)

Classification Company

Profile Questions ?

* Are you currently working with an FIU department, either providing services or coordinating to begin providing services? No

If YES, to Question 1 above, outline FIU department name, individual contact name and phone number.

* Please select the annual household income for the president of the company: \$100,000 and Over

* Please select your company's annual income: \$1,000,000 and Over

What kind of services are being offered to the university?

* Please provide your Tax Classification:

* Please select N/A or No if you have not done business with the state of Florida in the past. If Yes, select the number of months/years since you have done business with the state of Florida.



* Please select N/A or No if you have not done business with a Florida county in the past. If Yes, select the number of months/years since you have done business with Florida county.



NIGP/Commodity Codes - Please select a Minimum of 3 Codes ?

	NIGP Code 1	Description		
1	<input type="text"/>		+	-

NAICS Codes ?

US - NAICS Codes	Description
<input type="text"/>	

Certification ?

HUBZone Program

Size of Small Business

* Certification Source Non Certified MBE

* Government Classification Non-Minority

- C. Select the annual household income for the president of the company by clicking on the **Search** Icon and select an item from the list.

* Please select the annual household income for the president of the company:

Look Up List

Question ID: 22

List Line Number: =

List Item: begins with

[Basic Lookup](#)

Search Results

View 100 | 1-6 of 6

List Line Number	List Item
1	\$100,000 and Over
2	\$75,000 - \$99,999
3	\$50,000 - \$74,999
4	\$25,000 - \$49,999
5	Below \$25,000
6	Prefer Not To Answer

D. Select the company's annual income by clicking on the **Search** Icon and select an item from the list.

Please select your company's annual income:

Look Up List x

Question ID 23

List Line Number =

List Item begins with

Search Clear Cancel Basic Lookup

Search Results

View 100 1-5 of 5

List Line Number	List Item
1	\$1,000,000 and Over
2	\$500,000 - \$999,999
3	\$250,000 - \$499,999
4	Below \$250,000
5	Prefer Not To Answer

E. Select an NIGP code by clicking on the **Search** Icon. Note: If you are using a NIGP that ends with “00”, do not enter the last 2 zeros.

NIGP/Commodity Codes - Please select a Minimum of 3 Codes ?

	NIGP Code 1^	Description^		
1	<input type="text"/>		<input style="border: 1px solid red;" type="button" value="+"/>	<input type="button" value="-"/>

Look Up NIGP Code 1

Category

Description

Short Description

[Basic Lookup](#)

Search Results

Only the first 300 results of a possible 9200 can be displayed.

View 100 1-300 of 300

Category	Description	Short Description
00505	Abrasive Equipment and Tools	ABRASIVES
00514	Abrasives\ Coated: Cloth\ Fibe	ABRASIVES
00521	Abrasives\ Sandblasting\ Metal	ABRASIVES
00528	Abrasives\ Sandblasting (Other	ABRASIVES
00542	Abrasives\ Solid: Wheels\ Ston	ABRASIVES
00556	Abrasives\ Tumbling (Wheel)	ABRASIVES
00563	Grinding and Polishing Compoun	ABRASIVES
00570	Pumice Stone	ABRASIVES
00575	Recycled Abrasives Products an	ABRASIVES
00584	Steel Wool\ Aluminum Wool\ Cop	ABRASIVES
01005	Acoustical Tile\ All Types (In	ACOUSTICAL
01008	Acoustical Tile Accessories: C	ACOUSTICAL
01009	Acoustical Tile Insulation	ACOUSTICAL

F. Select an NAISC Code by clicking on the **Search** Icon.

NAICS Codes ?

US - NAICS Codes	Description
<input type="text"/>	<input type="text"/>

Look Up Standard Industry Code x

SIC Code Type: US - NAICS Codes

Standard Industry Code: begins with

Description: begins with

[Basic Lookup](#)

Search Results

Only the first 300 results of a possible 1823 can be displayed.

View 100 | 1-300 of 300

Standard Industry Code	Description
11	Agriculture, Forestry, Fishing
111	Crop Production
1111	Oilseed and Grain Farming
11111	Soybean Farming
11112	Oilseed (except Soybean) Farmi
11113	Dry Pea and Bean Farming
11114	Wheat Farming
11115	Corn Farming
11116	Rice Farming
11119	Other Grain Farming
111191	Oilseed and Grain Combination
111199	All Other Grain Farming
1112	Vegetable and Melon Farming

G. After all **required** information has been entered, click **Next** to proceed.

Certification ⓘ

HUBZone Program

Size of Small Business

* Certification Source Non Certified MBE

* Government Classification Non-Minority

Comments ⓘ

* Required field

Exit Save for Later < Previous **Next >**

H. Fill in the **Primary Address** in step 3 of 6. If the supplier has a different **Remit to Address, Ordering Address** or **Invoice Address**, fill that information as well.

Welcome Identifying Information **Addresses** Contacts Payment Information Submit

Exit Save for Later < Previous Next >

Addresses - Step 3 of 6

Other Addresses: Check boxes below to indicate addresses that are different from your Primary Address above.
Invoice Address: Address from which you will receive invoices from us, if we are billing you.

Primary Address ⓘ

* Country United States

Address 1

Address 2

Address 3

City

County Postal

State Florida

* Primary Email

Other Addresses ⓘ

Check boxes below to indicate addresses that are different from your Primary Address above:

Remit To Address
Address for remitting payment

Ordering Address
Address for shipping goods/service

Invoice Address
Address from which you send invoice

Exit Save for Later < Previous **Next >**

- I. In Step 4 of 6, the supplier must fill in the **Contact Information** and create a Password to login to SCR in the future. Click **Next** to proceed.

The screenshot shows a progress bar at the top with six steps: Welcome, Identifying Information, Addresses, **Contacts** (highlighted with an orange square), Payment Information, and Submit. Below the progress bar are four buttons: Exit, Save for Later, < Previous, and Next >. The main heading is "Contacts - Step 4 of 6". Below this is a "Contacts" link with a help icon. A message states: "You have not added any contact information to your application. Click 'Add Contact' button to add new contact information." A red box highlights the "Add Contact" button. At the bottom, there is a "* Required field" label and a row of buttons: Exit, Save for Later, < Previous, and Next >. The "Next >" button is highlighted with a red box.

The screenshot shows the "Add Contacts" form. The heading is "Add Contacts". Below it is "Contact Information" with a help icon. The form contains several fields, each with a red box around it: "* First Name", "* Last Name", "Title", "*Email Address", "* Telephone", "Fax Number", "* Contact Type" (a dropdown menu), "Password", and "Confirm Password". To the right of the "First Name" field is a checkbox labeled "Primary Contact". To the right of the "Telephone" field is a smaller field labeled "Ext". A red box highlights a password requirement note: "*Password is to access your supplier portal. *It must be 8 to 20 characters, must contain at least 1 upper case letter, 1 lower case letter and 1 number and may only use these characters @ # * () + = { } / ? ; , . - _". At the bottom, there are two buttons: "OK" (highlighted with a red box) and "Cancel".

Welcome	Identifying Information	Addresses	Contacts	Payment Information	Submit
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Contacts - Step 4 of 6

Exit Save for Later < Previous Next >

Contacts ?

Primary	Name	Phone	Designate Address
<input checked="" type="radio"/>	SAMPLE COMPANY	305/348-2000	Primary Address ▼

* Required field

Exit Save for Later < Previous **Next >**

J. In Step 5 of 6, the supplier must complete **Payment Information**. Their bank name, bank ID and account number are required fields. On this page the supplier may opt for a Single Use Account (SUA).

Welcome	Identifying Information	Addresses	Contacts	Payment Information	Submit
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Payment Information - Step 5 of 6

Exit Save for Later < Previous Next >

Payment Preferences ?

Requested Payment Terms Due Immed

Email Address

*Payment Method ▼

Enable Email Payment Advice

Single Use Account

The University recommends participation in our SUA Program; enrollment will allow us to remit payment to you faster via single use credit cards. Please note that you must be able to accept credit card payment if you select this option and there is a fee associated with this option.

For more information click here. [Click Here](#)

*Required Field

Exit Save for Later < Previous Next >

Welcome Identifying Information Addresses Contacts **Payment Information** Submit

Exit Save for Later < Previous Next >

Payment Information - Step 5 of 6

Payment Preferences ?

Requested Payment Terms 01 Net30

Email Address SAMPLE@COMPANY.COM

*Payment Method Electronic Funds Transfer

Enable Email Payment Advice

Supplier Banking Information ?

Country USA United States

*Bank Name SAMPLE BANK *Account Type Check Acct

Bank ID Qualifier 001

*Bank ID 348348348

*Bank Account Number 111111111111111111

*Required Field

Exit Save for Later < Previous **Next >**

K. The final page in the registration process is the **Submit** page. Here an **email address** is required. The registrant must agree to FIU's Standard terms and conditions by checking the box. Finally, **click** the **Submit** button.

Welcome Identifying Information Addresses Contacts Payment Information **Submit**

Exit Save for Later < Previous Next >

Submit - Step 6 of 6

Click the "Review" button to review the registration information.
Click the "Submit" button to submit your registration after reviewing and accepting following Terms of Agreement.

Email communication regarding this registration will be sent to:

Terms and Conditions ?

Make sure you read terms of agreement fully before submitting your registration.
I hereby consent to the use of the SSN or EIN provided herein for verification of compliance with state and federal regulations.
All suppliers and contractors conducting business on campus are required to either purchase a staff virtual permit (at the lowest staff rate), a daily virtual permit, or a 30 day virtual permit. For more information, please visit [Supplier Parking](#)

I certify that the information supplied herein, including all attachments, is correct to the best of my knowledge. I further certify that in doing business with Florida International University, I or my organization is compliance with Chapter 112, Florida Statutes, conflict of interest, and that I have disclosed the name of any FIU employee who owns, directly or indirectly, an interest of 5% or more in the above organization or any of its branches. I further certify that I am not an employee of Florida International University.

[FIU's Standard Terms and Conditions](#)

By submitting this application to be a registered supplier with FIU, the supplier hereby agrees to FIU's Standard Terms and Conditions, as they may be revised. The supplier represents that the supplier has had the opportunity to review and agrees to abide by all the terms and conditions contained therein, and that such terms and conditions shall govern the supplier's resulting relationship with FIU.

Review **Submit**

Exit Save for Later < Previous Next >

- L. The supplier will receive an email confirming the receipt of their application. It will include a **USER ID** Number which will be used so they can login and make changes.

Your Recent Supplier Registration

Your supplier registration application, Registration ID 0000008882, has been accepted.
The following Supplier ID has been created for you:

Supplier Name: SAMPLE COMPANY
Supplier ID: 0000047795

User ID: SUP0000047795

Your Supplier ID will be active in the system after one business day. You will need your User ID to access the Supplier Change Request page. Please remember the password that was entered at the time of registration. If you forget your password, click on the "Forgot Password" link and follow the directions. If you have any questions or feedback regarding your Supplier ID, please contact Procurement Services by emailing vendors@fiu.edu.

Click on the link to access Supplier Portal

https://pslinks.fiu.edu/psc/psfssup/SUPPLIER/ERP/c/NUI_FRAMEWORK.PT_LANDINGPAGE.GBL

Thank you,

FIU Procurement Services

- M. The FIU Procurement department has Registration Approvers who conduct a **two-step** review of the supplier registration information in PantherSoft Financials. There is an **initial review** for completeness. Next, the **details** of the application are verified. Then the registration will be forwarded for final authorization to a **Supplier Approver**. The **Supplier ID** will be issued after the review of the application.