

## Supplier's Registration Steps - UMarketplace

*The process below occurs after the UM Departments completes a New Supplier Request in Workdy. The following document can't be sent directly to suppliers as an application. Below are the basic steps and screenshots of what the supplier must complete to register. After registration, the UM onboarding approval process will need to be completed for the supplier to become active in Workday.*

Before the invitation process begins the "New Supplier Request" form must be completed by the department and approved by Purchasing. The request form can be found under the "UM QuickLinks" on the Workday Homepage. Once approved by Purchasing the supplier will receive an email invite from [UMiami@sciquest.com](mailto:UMiami@sciquest.com) to complete. Below is an example of the supplier's process.

2018-02-16 15:30 GMT+01:00 University of Miami <[UMiami@sciquest.com](mailto:UMiami@sciquest.com)>:

Supplier Invitation for University of Miami

Dear [Supplier Name],

The University of Miami (UM) is pleased to invite you to register for its new supplier management system, UMarketplace, an integrated solution to transmit purchase orders and invoices electronically.

To register for access, please click on the "Register Now" button below. Your application must be complete in order to be submitted. You will be notified via email once your application has been received and approved. Once your application is submitted and approved, you will have access to your secure information where you can add additional details about your organization, grant access to colleagues within your organization, and more.

[Register Now](#)

Thank You,

University of Miami Supplier Onboarding Team

If you have questions, please email the UM Purchasing Data Team at: [supplychain.supplierapp@miami.edu](mailto:supplychain.supplierapp@miami.edu) or by phone at [+1 305-284-5751](tel:+13052845751).

Thank you.

The steps below must be completed by the supplier. Then the UM onboarding approval process can begin.

## 1. Welcome

**A1 FIRE PROTECTION LLC** **Welcome to Supplier Registration** ?

Registration **Invited** for:  
University of Miami  
**0 of 10** Steps Complete

**Welcome**

- Company Overview ✓
- Business Details ✓
- Addresses ✓
- Contacts ✓
- Diversity ✓
- Insurance ✓
- Payment Information ✓
- Tax Information ✓
- Independent Contractor ✓
- Conflict of Interest ✓
- Certify & Submit

**Before you begin registering**  
Compiling the necessary information prior to beginning the process will ensure a smooth and trouble-free registration. The following will be requested during the registration process:

- Address, phone, and email information
- List of commodities you supply
- Diversity information and certifications (if applicable)
- Additional contacts for you or your business (if applicable)
- Certificate of Insurance with University of Miami named as additional insured
- W-9 or W8 information signed and dated in the current tax year updates required annually <https://www.irs.gov/forms-pubs>
- Duns & Bradstreet (if applicable) <http://www.dandb.com>
- Articles of Incorporation or Articles of Organization

Ensure all the required fields and sections are completed and attest to the validity of the information and submit the form electronically.

For more information, please refer to the Registration FAQ link, on the top left side.

**Required to Start Registration**

Legal Company Name \*

★ Required to Complete Registration

[Get Started >](#) [Save Changes](#)

## 2. Company Overview

**A1 FIRE PROTECTION LLC** **Company Overview** ?

Registration **Invited** for:  
University of Miami  
**0 of 10** Steps Complete

Welcome

- Company Overview** ✓
- Business Details ✓
- Addresses ✓
- Contacts ✓
- Diversity ✓
- Insurance ✓
- Payment Information ✓
- Tax Information ✓
- Independent Contractor ✓
- Conflict of Interest ✓
- Certify & Submit

To save changes, you must first click **Get Started** on the [Welcome](#) page to accept the terms and conditions.

The information entered on this page allows us to track general information about your company to ensure we have the most up-to-date information in our system.

Doing Business As (DBA)

Country of Origin \*

Does your business have a DUNS number? \*  Yes  No

**Legal Structure** is used by the IRS to classify the form of a business organization and ultimately determines which tax documentation is required. Please provide the appropriate Legal Structure information as it is currently stated with the IRS. For more information about business structures, please visit [www.irs.gov](http://www.irs.gov).

Legal Structure \*

Tax ID Number

Website

**Additional Questions**

For 1099 reporting, please indicate if any of the following apply to your business: \*

Is this company publicly owned company \*

★ Required to Complete Registration

[Previous](#) [Next >](#) [Save Changes](#)

### 3. Business Details

**A1 FIRE PROTECTION LLC** **Business Details** ?

To save changes, you must first click **Get Started** on the [Welcome](#) page to accept the terms and conditions.

The information on this page allows us to track important details about your company, such as the areas where you operate and the products and services that you provide. Additionally, this data is used to determine whether or not your business meets the small business size standards as defined by the U.S. Small Business Administration. The SBA standards are based on your NAICS code and annual revenue, or number of employees.

---

Year Established  YYYY

Number of Employees

Business Description \*  2500 characters remaining

**Annual Revenue/Receipts**

2020 Annual Revenue/Receipts *	<input type="text" value=""/>	USD
2019 Annual Revenue/Receipts *	<input type="text" value=""/>	USD
2018 Annual Revenue/Receipts *	<input type="text" value=""/>	USD

**Sales Territories**

Is Your Business a Local Supplier?  Yes  No

Is Your Business a National Supplier?  Yes  No

U.S. Service Area -

International Service Area -

---

★ Required to Complete Registration

#### Products and Services

NAICS Codes \*  No Primary NAICS Code Selected

Commodity Codes -

Keywords  700 characters remaining

#### Additional Questions

Supplier Category (select one) \*

The University's standard cash discount on invoice payment and payment terms are **2% 10 days net 30**. Discount date and/or payment for agreed upon payment terms is calculated from invoice receipt date. Original invoices must be sent to the University's Accounts Payable Department.

Supplier Payment Terms \*

Are you interested in obtaining information regarding cXML order distribution?

Yes  No

---

★ Required to Complete Registration

#### 4. Address

**A1 FIRE PROTECTION LLC** **Addresses** ?

Registration **Invited** for:  
*University of Miami*  
**0 of 10** Steps Complete

- Welcome
- Company Overview ✓
- Business Details ✓
- Addresses** ✓
- Contacts ✓
- Diversity ✓
- Insurance ✓
- Payment Information ✓
- Tax Information ✓
- Independent Contractor ✓
- Conflict of Interest ✓
- Certify & Submit

To save changes, you must first click **Get Started** on the **Welcome** page to accept the terms and conditions.

Please enter any physical or mailing address information and communication correctly. Any required address types are listed below.

**Required Information**

The following address types are required to complete registration:

- Fulfillment
- Physical
- Remittance

*No addresses have been entered*

[Add Address](#) [Hide Inactive Addresses](#)

[← Previous](#) [Next →](#)

#### 5. Contacts

**A1 FIRE PROTECTION LLC** **Contacts** ?

Registration **Invited** for:  
*University of Miami*  
**0 of 10** Steps Complete

- Welcome
- Company Overview ✓
- Business Details ✓
- Addresses ✓
- Contacts** ✓
- Diversity ✓
- Insurance ✓
- Payment Information ✓
- Tax Information ✓
- Independent Contractor ✓
- Conflict of Interest ✓
- Certify & Submit

To save changes, you must first click **Get Started** on the **Welcome** page to accept the terms and conditions.

Please enter contact information for any individuals at your organization who may provide valuable information or help to our company. This will help us ensure we are always contacting the correct individual. Contacts can be linked to one existing address. Any required contact types are listed below.

- Remittance

*No contacts have been entered*

[Add Contact](#) [Hide Inactive Contacts](#)

[← Previous](#) [Next →](#)

## 6. Diversity

A1 FIRE PROTECTION LLC		Diversity
Registration Invited for: University of Miami 0 of 10 Steps Complete		To save changes, you must first click <b>Get Started</b> on the <a href="#">Welcome</a> page to accept the terms and conditions.
Welcome		We strive to do business with diverse companies, please select all that apply to you or your business.
Company Overview	✓	If you or company belong to one of the categories below, select "Minority Business Enterprise (MBE)" and click "Done". To select <b>Ethnicity</b> , click the "Edit" button on the right.
Business Details	✓	<ul style="list-style-type: none"> <li>• African American</li> <li>• Hispanic American</li> <li>• Asian Indian American</li> <li>• Native American</li> <li>• Asian Pacific American</li> </ul>
Addresses	✓	<b>**Please register your business or update your account at sam.gov (registration is free)</b>
Contacts	✓	
<b>Diversity</b>	✓	
Insurance	✓	<p><b>Required Information</b></p> <p>Please click on the "Add Diversity Classifications" button to declare any Diversity Classifications that are applicable to you or to state that you do not qualify.</p> <p>No Diversity Classifications Selected</p>
Payment Information	✓	
Tax Information	✓	
Independent Contractor	✓	
Conflict of Interest	✓	
Certify & Submit		<p>◀ Previous</p> <p>Next ▶</p>

## 7. Insurance

A1 FIRE PROTECTION LLC		Insurance
Registration Invited for: University of Miami 0 of 10 Steps Complete		To save changes, you must first click <b>Get Started</b> on the <a href="#">Welcome</a> page to accept the terms and conditions.
Welcome		The University of Miami (UM) requires suppliers to maintain insurance coverage at all times. Failure to maintain current insurance certification in UM's supplier portal UMarketplace may cause delays in issuing purchase orders or payments, until the insurance requirements have been met.
Company Overview	✓	Please add your company's insurance information below to complete this section. For assistance in completing this section, please review a sample of an acceptable <a href="#">Certificate of Insurance (COI)</a> and review <a href="#">UM's insurance requirements</a> . Note: A COI must be submitted in PDF format. Insurance bills and/or declaration pages will not be not accepted.
Business Details	✓	<b>Note: The University of Miami must be listed as the certificate holder and as an additional insured under the general liability policy in the document.</b> To access and review the Risk Management Vendor Insurance Request Form, <a href="#">click here</a> .
Addresses	✓	If you have any questions, please contact UM's Risk Management office directly at: (305) 284-3163 or <a href="mailto:umcerts@miami.edu">umcerts@miami.edu</a>
Contacts	✓	Thank you.
Diversity	✓	
<b>Insurance</b>	✓	<p><b>Required Information</b></p> <p>At least one insurance policy is required to complete this section.</p> <p>No Insurance has been entered.</p> <p><a href="#">Add Insurance</a></p>
Payment Information	✓	
Tax Information	✓	
Independent Contractor	✓	
Conflict of Interest	✓	
Certify & Submit		<p><b>Additional Questions</b></p> <p>Will you be providing on-site services? *</p> <p> <input type="radio"/> Yes  <input type="radio"/> No         </p> <p>Click on edit to select all that apply; if none are applicable, then choose "None of the Above" *</p> <p>- <a href="#">Edit</a></p> <p>◀ Previous    <a href="#">Next</a>    <a href="#">Save Changes</a></p>

## 8. Payment Information

**A1 FIRE PROTECTION LLC** **Payment Information** ?

Registration **Invited** for:  
University of Miami  
**0 of 10** Steps Complete

- Welcome
- Company Overview ✓
- Business Details ✓
- Addresses ✓
- Contacts ✓
- Diversity ✓
- Insurance ✓
- Payment Information** ✓
- Tax Information ✓
- Independent Contractor ✓
- Conflict of Interest ✓
- Certify & Submit

To save changes, you must first click **Get Started** on the [Welcome](#) page to accept the terms and conditions.

Information on this page is used to determine how and where you will receive payment. Please enter an email address if you wish to receive an email notification regarding payments including invoice, date, and amount.

All suppliers will default to payment by check. The University of Miami may also issue payment by credit card\*.

**Please email [epay@miami.edu](mailto:epay@miami.edu) to request enrollment in ePayables (payment by credit card). As part of your request, include your Company Name as listed in the Supplier Application and your Tax ID.**

\*The Credit Card payment method is the University of Miami's ePayables payment solution where suppliers receive an email authorization to charge a credit card number for outstanding invoices.

**Required Information**  
At least one payment type is required to complete this section.

*No payment information has been entered.*

[Add Payment Information](#)

[← Previous](#) [Next →](#)

## 9. Tax Information

**A1 FIRE PROTECTION LLC** **Tax Information** ?

Registration **Invited** for:  
University of Miami  
**0 of 10** Steps Complete

- Welcome
- Company Overview ✓
- Business Details ✓
- Addresses ✓
- Contacts ✓
- Diversity ✓
- Insurance ✓
- Payment Information ✓
- Tax Information** ✓
- Independent Contractor ✓
- Conflict of Interest ✓
- Certify & Submit

To save changes, you must first click **Get Started** on the [Welcome](#) page to accept the terms and conditions.

Tax information is used for payment and the tax document should be uploaded using a PDF format.

**Required Information**  
At least one tax document is required to complete this section.

*No tax information has been entered*

[Add Tax Document](#)

[← Previous](#) [Next →](#)

## 10. Independent Contractor

A1 FIRE PROTECTION LLC		Independent Contractor
Registration Invited for: University of Miami		To save changes, you must first click <b>Get Started</b> on the <a href="#">Welcome</a> page to accept the terms and conditions.
0 of 10 Steps Complete		
Welcome		Alumnus / Alumna of the University of Miami *
Company Overview	✓	<input type="radio"/> Yes <input type="radio"/> No
Business Details	✓	Have you been an employee of the University Miami in the past 12 months? *
Addresses	✓	<input type="radio"/> Yes <input type="radio"/> No
Contacts	✓	
Diversity	✓	Are any of your immediate family members employees of the University of Miami? *
Insurance	✓	<input type="radio"/> Yes <input type="radio"/> No
Payment Information	✓	
Tax Information	✓	Are any significant stock holders (10% or more of the current authorized stock) partners, employees, officers, members, agents, or ambassadors in a decision making capacity of your organization employees of the University of Miami? *
<b>Independent Contractor</b>	✓	<input type="radio"/> Yes <input type="radio"/> No
Conflict of Interest	✓	
Certify & Submit		
		★ Required to Complete Registration
		<a href="#">← Previous</a> <a href="#">Next →</a> <a href="#">Save Changes</a>

## 11. Conflict of Interest

A1 FIRE PROTECTION LLC		Conflict of Interest
Registration Invited for: University of Miami		To save changes, you must first click <b>Get Started</b> on the <a href="#">Welcome</a> page to accept the terms and conditions.
0 of 10 Steps Complete		
Welcome		WILL YOU PROVIDE AND/OR DO YOU USE ANY EQUIPMENT, SYSTEM, OR SERVICES THAT USES COVERED ARTICLES* EQUIPMENT OR SERVICES AS A COMPONENT OF ANY SYSTEM, OR AS PART OF ANY SYSTEM? *
Company Overview	✓	<input type="radio"/> Yes <input checked="" type="radio"/> No
Business Details	✓	
Addresses	✓	
Contacts	✓	
Diversity	✓	
Insurance	✓	
Payment Information	✓	
Tax Information	✓	
Independent Contractor	✓	
<b>Conflict of Interest</b>	✓	
Certify & Submit		
		★ Required to Complete Registration
		<a href="#">← Previous</a> <a href="#">Next →</a> <a href="#">Save Changes</a>

## 12. Certify & Submit

**A1 FIRE PROTECTION LLC**

Registration **Invited** for:  
*University of Miami*

**0 of 10** Steps Complete

- Welcome
- Company Overview ✓
- Business Details ✓
- Addresses ✓
- Contacts ✓
- Diversity ✓
- Insurance ✓
- Payment Information ✓
- Tax Information ✓
- Independent Contractor ✓
- Conflict of Interest ✓
- Certify & Submit**

### Certify & Submit

To save changes, you must first click **Get Started** on the **Welcome** page to accept the terms and conditions.

Please type your initials in the box below acknowledging that you are a company official and that all information is correct. It is the Supplier's responsibility to ensure company information is accurate and that company information is kept current. Inaccurate company information may result in payment delays.

Additionally, by submitting this registration, you certify all information provided is true and accurate. Knowingly providing false information may result in disqualifying you or your company from doing business with us.

Preparer's Initials *	<input type="text"/>
Preparer's Name *	<input type="text"/>
Preparer's Title *	<input type="text"/>
Preparer's Email Address *	<input type="text"/>
Today's Date	12/2/2021
Certification *	<span style="color: red;">✗</span> I certify that all information provided is true and accurate.

**Submit**

The steps above must be completed by the supplier. Then the UM onboarding approval process can begin. See example below.

