



New Account Establishment Form

General Information:

The Joint Services Prime Vendor Program (JSPVP) requires specific information to establish each new account. The establishment of new accounts is required whenever an activity with its own location code exists, but not for sub-accounts that fall under a single location code...i.e. a snack bar in an NCO Club that already has an established account.

- Requests for new accounts must be submitted directly from the requesting business activity and not from the Prime Vendor (PV).
- The business activity must qualify to be in the program and be approved by U.S. Army Installation Command (IMCOM) HQ - G9, Business Operations - JSPVP personnel. Approval will be determined based on the requested information below provided by the business activity. *NOTE: If a submission is disapproved, it will be returned directly to submitting activity with an explanation.*
- Upon approval, the form will be sent to IMCOM HQ - G9, NAF Contracting (NC) for a PV contract modification. The modification will be sent to the approved business activity's respective PV for formal approval/acceptance via signature. When the contract modification has been signed by the PV and countersigned by the Contracting Officer, the contract modification will be considered executable. At this point, the PV may begin accepting orders/making deliveries to the business activity under the PV contract, but not before such time. If the PV accepts orders/makes deliveries prior to the modification execution date, the PV *does not* have to honor the contracted pricing and terms.

To request a JSPVP account, please complete the required information in Sections 1 and 2.
Return completed form to Thomas.barclay.naf@mail.mil

Section 1 - Requesting Business Activity

Parent Military Installation:

Activity Name:

Activity Delivery Location: Street Address:

Building # (as applicable):

City:

State:

Zip:

Website:

Primary Appointed Ordering Officer (OO): (if a signed appointment letter is not already on file for the primary or alternate OO, contact your local/region NAF Contracting Office before placing first order.

****Applicable to all branches of service and business activities).**

Name:

Phone Number:

Fax Number:

Email Address:

Business Activity Supervisor:

Name:

Phone Number:

Fax Number:

Email Address:

Section 2 – Prime Vendor Information

Servicing Distribution House:

City:

State:

Assigned Rep Name:

Phone Number:

Fax Number:

Email address:

Customer Account Number Assigned by Prime Vendor:

Signature/Date of Requestor:

Check out our blog site for a ton of information about our program and benefits. www.mwrbrandcentral.com/JSPVP

Section 3 - JSPVP Approval

To be completed by HQ JSPVP Personnel

If disapproved: (state basis/explanation):

Approval Signature: