

**VENDOR SET-UP/MAINTENANCE**

**NON-PERSON VENDOR - (CORPORATION)**

Check One:  New Vendor  Vendor Change

Requested By: Name: _____ Local: _____
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Legal Name of Company: \_\_\_\_\_

Cheques Payable to Name: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Fax Number: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Mailing Address (if different): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Taxes Collected: GST \_\_\_\_\_ PST \_\_\_\_\_ None: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Fax Number: (\_\_\_\_) \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Currency (check one):  U.S.  Canadian

**PERSON VENDOR**

Check One:  New Vendor  Vendor Change

Name: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Fax Number: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Mailing Address (if different): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

S.I.N. \_\_\_\_\_

Currency (check one):  U.S.  Canadian

Duplicate Check <input type="checkbox"/>	Approved for Entry by: _____
Employee <input type="checkbox"/>	