

Date:		
<b>SUPPLIER GENERAL INFORMATION</b>		
Company Name :		Year established:
Address:		Federal tax ID number:
Phone :		Fax #:
Web site:		
Type of business: Retail ( )      Distributor ( )      Manufacturer ( )      Other:		
<b>TYPE OF PRODUCTS / SERVICES:</b>		
Company CEO (Name) :		Email:
Sales Representative :		Phone:      Email :
Account payable contact :		Phone:      Email :
Distributors for the Dominican Republic:		
<b>BRANDS OWNED / REPRESENTED</b>		
<b>COMERCIAL REFERENCES</b>		
<b>BUSINESS</b>	<b>CONTACT</b>	<b>PHONE</b>
<b>BANKING INFORMATION</b>		
Bank name:		Account number:
ABBA Number:		Swift Number:
Signature and company seal		
<p>I hereby declare that the information provided in the present document is true and correct. I authorize the company to make any investigation to verify them. It is understood on my part that if the information provided is false or incorrect this application will be automatically annulled. The information provided in this form will be confidential.</p>		
<b>FOR INTERNAL USE ONLY</b>		
<b>CONDICIONES DE NEGOCIACION / INFORMACION GENERAL</b>		
Department/Supplier Request:		Buyer:
Offshore Company: No ( )      Si ( ) Local Company Name:		
Credit Terms:		Currency: USD ( ) DOP ( ) EU ( ) OTROS:
Purchasing Company Code:		
Products of Interest for first Purchase:		
Account Creator Name:		<b>PURCHASING DIRECTOR</b>
		Authorized Signature:
Internal Supplier Number (SAP):		AUTHORIZED ( )      REJECTED ( )
<b>Comments:</b>		