



Vendor Profile

BlueChip Sales Territory: _____ BlueChip Account Mgr: _____

Vendor Location Information

Legal Name: _____ HST #: _____

Operating Name: _____ Phone: _____

Address: _____ Fax: _____

City: _____ Province: _____ Postal Code: _____

Website: _____

Vendor Business Profile

Business Description: _____

Primary Products/Brands Sold: _____

Years Under Present ownership: _____ # Sales Reps: _____

Business Type: Limited/Incorporated Sole Proprietorship

Business Model: Manufacturer/Reseller Authorized Distributor/Reseller

Leasing Companies Used : _____

Average Size Transaction: _____ Who Co-ordinates Leasing: _____

of serialized assets over \$3K sold in past 12M: _____ Avg. Size Transaction: _____

Lease Volume past 12M: _____ Anticipated Lease Volume: _____

Main Contact: _____ email: _____