



New Supplier Form

- To **ADD** a new supplier to our accounting system, please complete all sections of this form and return via email to: **procurement@tacoraresources.com**
- Please take the time to fill out this form completely, as an incomplete form may create a delay in the supplier setup and/or payments to supplier.

Supplier Name:

For Contractors - WorkplaceNL Firm #:

Payment Terms: **Default Net 30 days**

Specify if Different Terms:

Invoicing Currency: CAD USD

Supplier Contact Information:

Supplier Name:

Street Address or PO Box:

City: State: Zip Code:

Region/Province: Country:

Ordering Contact Name: Title:

Phone: Fax:

E-Mail: Web Address:

Check if remit-to address is same as supplier contact information:

Remittance Name:

Street Address or PO Box:

City: State: Zip Code:

Region/Province: Country:

Accts Receivable Contact Name: Title:

Phone: Fax:

E-Mail: Web Address:

EFT Information

Bank Country: **Canada**

Bank Name:

Account Name:

Account Number:

Financial Institution Number (Canadian Banks): (3 Digits)

Transit Number (Canadian Banks): (5 Digits)

EFT Remittance E-Mail:

Bank Country: **United States**

Bank Name:

Account Name:

Account Number:

Routing Number (US Banks):

EFT Remittance E-Mail:

Taxpayer Identification Number (TIN / BN) :

United States Entities must attach a W-9 to this document. <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

Please check if W-9 is attached:

Filing Status: Sole Proprietor Partnership Corporation

Does your company identify with any of the following groups? (Check all that apply)

Women: Persons with Disabilities: Visible Minorities: Indigenous People: (Specify below)

Innu Nation - Labrador: Innu TakuaiKAN Uashat mak Mani-Utenam: Matimekush – Lac John First Nation:

Naskapi Nation of Kawawachikamach: NunatuKavut: Other:

Comments : [Click here to enter text.](#)