



## **HOUSING INCENTIVE PROGRAM**

### **VENDOR INFORMATION**

\_\_\_\_\_ **NEW VENDOR**

\_\_\_\_\_ **UPDATE VENDOR INFORMATION**

**FULL NAME:** \_\_\_\_\_

**BUSINESS NAME (if applicable):** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TOWN/PROV:** \_\_\_\_\_

**POSTAL CODE:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_

**FAX #:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**HST #:** \_\_\_\_\_

**TYPE OF BUSINESS (if applicable):** \_\_\_\_\_

**ex:** auto repairs, office supplies, promotional, advertising, etc.....

OFFICE USE ONLY:
Received by: _____
Date: _____