



Application Form

One Supplies Distributor

Name	<input type="text"/>	Location	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>
Current Occupation	<input type="text"/>	Car and valid driver license?	Yes <input type="radio"/> No <input type="radio"/>

Do you have any experience in sales, particularly in the industry supplies sector?

Yes No

If yes, please describe your experience.

Have you ever worked for, or do you have any connections with, industrial suppliers who need stretch film, tape, thermal paper etc.?

Yes No

If yes, please provide details.

Please explain why you are interested in becoming our distributor and how you believe this partnership would be mutually beneficial.

How did you discover our website or distributor opportunity?

- Google Facebook Friend
 Linkedin Instagram Other, please specify _____

Date _____

Signature _____

Please send the completed form to contact@1supplies.ca