

ProChek1 Vision X - Vendor Application & Agreement

Vendor Application - Screening & Approval Form

Legal Business Name

Country of Registration

Business Registration Number

Business Address

Business Phone Number

Email Address

Website (if available)

Primary Contact Name

Product Categories Offered

Certifications Held (FDA, CE, etc.)

Languages Supported in Product Manuals

Years in Business

Required Document Uploads (Check all that apply)

Business License

Tax Certificate

Government ID

Product Certifications

Bank Account Information for Commission, Refund, and Cancellation Withdrawals

Bank Name

Bank Address

Account Holder Name

Account Number/IBAN

Routing Number/SWIFT/BIC

Currency of Account

Authorized Signature

Signature: _____

Date: _____

Print Name: _____

Title: _____