

MGCC REGISTERED SUPPLIER

Supplier Name:

Address:

City:

Province:

Postal Code:

Contact Person:

Title:

Phone:

Email address:

SUPPORTING DOCUMENTS CHECKLIST*The following documents must be submitted with this application to support the approval of your paper*

Product details from supplier (specification sheet or latest invoice)	Attached	N/A
2 unopened and consecutively numbered product samples	Attached	N/A
Copy of packing slip to be provided upon receipt of paper	Attached	N/A
Quality Assurance Testing Checklist (enclosed)	Attached	N/A
1 opened and tested product	Attached	N/A
Other:	Attached	N/A

TERMS & CONDITIONS OF APPROVAL

CERTIFICATION: I hereby certify, on behalf of the organization, that the information provided on and with this application is true and correct and that I have read, understand and agree to abide by the MGCC Technical Integrity Terms and Conditions of Approval.

Applicant's Signature

Date