

*REQUIRED FIELDS

Please type all responses

Supplier Site Information

*Supplier Name: (as it appears on invoices) Alternate Name: (ie. dba, legal name, subsidiary of) Supplier Tax ID, VAT Number or Applicable ID#: *Remittance Address Line 1: (as it appears on invoices) Remittance Address Line 2: Remittance Address Line 3: Remittance Address Line 4: *Remittance City: Remittance State/Province: (if applicable in Country) Remittance Postal Code: (if applicable in Country) *Remittance Country: *Remittance Email Address: *Main Phone Number: Main Email Address: *Primary Contact Name: *Primary Contact Title: *Primary Contact Phone: *Primary Contact Email: WIS Point of Contact: Date Sent to Supplier:

This form is designed for WIS Supplier's use globally, and therefore may not contain the exact verbiage applicable in your Country. Please complete to the best of your knowledge and email supplier@wellboreintegrity.com with any questions.