



Application for Independent Distributors

Please forward the completed form by fax to CanTalk Canada Inc. at 1 204 982 1244 or by regular mail to CanTalk Canada Inc. attention Maureen Mitchells, 400- 136 Market Ave, Winnipeg, MB, R3B 0P4, Canada.

GENERAL

Business Name		Internet Web Site		
Business Street Address:		Internet Web Site		
City	State/Province	Postal/Zip	Country	
Legal Business Name		Where Registered		
Business Mailing Address:				
City	State/Province	Postal/Zip	Country	
PRIMARY BUSINESS CONTACT				
Name		e-Mail Address		
Address:				
City	State/Province	Postal/Zip	Country	
Telephone	Facsimile	Mobile		
PRIMARY TECHNICAL CONTACT				
Name		e-Mail Address		
Address:				
City	State/Province	Postal/Zip	Country	
Telephone	Facsimile	Mobile		
BUSINESS PROFILE				
Business Opening Date (M/D/Y)	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Incorporated	<input type="checkbox"/> Other
	Names of Partner(s)		Description	
Principal Bank Name	Contact Name		Contact Phone Number	
Trade Reference Name	Contact		Contact Phone Number	
Have you personally or have you been principle of a company which, or has the company or associated company declared bankruptcy in the past 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No		When declared and who declared?		
\$ Current Annual Sales Volume	Type of Business: <input type="checkbox"/> Wholesale <input type="checkbox"/> Retail <input type="checkbox"/> e-Business <input type="checkbox"/> Other			
Do you have a direct sales force?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a call centre?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Please list the Languages you work in.

Please list the countries you operate in or sell into.

Do you sell long distance services from other telecommunication companies? Yes No If yes please identify the nature and volume.

Do you sell operator services from other telecommunication companies? Yes No If yes please identify the nature and volume.

Do you sell language services from other telecommunication companies? Yes No If yes please identify the nature and volume.

Do you sell telecom billing services from other telecommunication companies? Yes No If yes please identify the nature and volume.

Do you sell VOIP services from other telecommunication companies? Yes No If yes please identify the nature and volume.

Do you sell prepaid card services from other telecommunication companies? Yes No If yes please identify the nature and volume.

Do you sell international directory assistance services? Yes No If yes please identify the nature and volume.

Do you sell call center services from other telecommunication companies? Yes No If yes please identify the nature and volume.

What CanTalk services do you wish to market? Long Distance Operator services Language Services Telecom Billing and Collections VOIP Prepaid Card International Dir. Assist Call Center

Are there other services which you wish to market? Yes No Please identify them here.

BUSINESS PLAN

Please briefly describe your business model.

Please provide volume forecast of sales of CanTalk services in the table following.

Service	Start Date	Initial Monthly	Year 1	Year 2	Year 3	Year 4
Long Distance (Minutes/Mo.)						
Operator Services (Calls/Mo.)						
Language Services (Minutes/Mo)						
Telecom Billing (Calls/Mo.)						
VOIP (Min/Mo.)						
Prepaid Card (\$/Mo.)						
Int'l DA (Calls/Mo.)						
Call Center (Calls/Mo.)						
Other						

Please provide other information which you think would be valuable in assisting CanTalk in understanding your opportunity.

Signature

Date