



# **THE DISTRICT COUNCIL OF SAVANNE**

## **REGISTRATION FORM**

### **POTENTIAL SUPPLIERS/CONTRACTORS/SERVICE PROVIDERS**

### **GOODS, WORKS AND SERVICES (INCLUDING CONSULTANCY SERVICES)**

*Please tick/fill in where appropriate*

#### **A. STATUS**

- (i) Sole proprietor
- (ii) Company
- (iii) Partnership
- (iv) Joint Venture

#### **B. DETAILS**

- (i) Name: .....
- (ii) Official Address: .....
- (iii) Name of Representative: .....
- (iv) Telephone Number: ..... Mobile Number: .....
- Fax Number: ..... Email Address: .....

#### **C. OTHER REQUIREMENTS**

- (i) Business Registration Number
- (ii) VAT Registration Number (if applicable)
- (iii) Tax Account Number (TAN)

#### **D. DOCUMENTS TO BE SUBMITTED (PHOTOCOPY)**

- (i) Certificate of Incorporation of Business ( Company Only)
- (ii) Business Registration Card
- (iii) Valid Trade Fee Receipt

#### **E. OTHER INFORMATION**

(I) Whether debarred by competent authority. Yes  No   
to participate in any bidding exercise

In the affirmative to inform/specify the period .....

(II) Whether convicted by any court of law for fraudulent/corrupt/collusive/coercive practice

Yes  No

**F. LIST OF ITEMS FOR WHICH I/WE AM/ARE REGISTERING**

SN	Items
(A)	<b>Good/Materials</b>
(B)	<b>Services</b>
(C)	<b>Works</b>

*Please attach additional sheets if required.*

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**Signature of Applicant**