

THE DISTRICT COUNCIL OF BLACK RIVER

**REGISTRATION FORM - POTENTIAL SUPPLIER
OF GOODS AND SERVICES**

A. DETAILS

- (i) Name of Company / Supplier :
- (ii) Name of Director(s): (1) (3).....
(2) (4)
- (iii) Nature of Business:
- (iv) Number of years of experience:
- (v) Official Address:
- (vi) Name of Representative and Designation:
- (vii) Signature of Company's Representative:
- (viii) Date: Seal of Company:
- (ix) Telephone Number: Mobile Number:
Fax Number: E-mail Address:

B. OTHER REQUIREMENTS

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

C. DOCUMENTS TO BE SUBMITTED

- Certificate of Incorporation of Business
- Business Registration Card
- Trade Fee Receipt
- Certificate of Registration with SMEDA (*if any*)
- Certificate of Registration with CIDB (*if any*)

D. OTHER INFORMATION

- | | YES | NO |
|---|--------------------------|--------------------------|
| (i) Whether debarred by competent authority to participate in any bidding exercise | <input type="checkbox"/> | <input type="checkbox"/> |
| In the affirmative to specify the period and reason thereof..... | | |
| (ii) Whether convicted by any court of law for fraudulent/corrupt/collusive/
coercive practice | <input type="checkbox"/> | <input type="checkbox"/> |
| In the affirmative to specify the period and reason thereof..... | | |
| <i>(Please attach additional information if required)</i> | | |

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

SN	DESCRIPTION OF GOODS/SERVICES

The attention of the applicants is hereby drawn to the fact that the District Council of Black River has no contractual obligation towards them and this shall not entitle them to become exclusive providers of goods and services to the Council

PLEASE ATTACH ADDITIONAL SHEETS IF REQUIRED