

SUPPLIER REGISTRATION FORM

SUPPLIER INFORMATION										
Company Name:										
Registration Number:			Registration	Date:						
VAT Number:			No of Emplo	oyees:						
Postal Address:				·						
Physical Address:										
Telephone Number:	Fax Number:									
Email Address:										
Website:										
SUPPLIER CONTACTS INFORMATION										
Name of Primary Contact		Position Held		Email Address						
Name of Sales/Technical Contact		Position Held		Email Address						
Name of Billing/Accounts Contact		Position Held		Email Address						
PRODUCTS OR SERVICES OFFERED BY THE SUPPLIER										
TRODUCTS ON SERVICES OF FERENCES										
Has the company supplied any products or services to SACU in the last three years? YES										
Has the company had any l executed in the last three	YES	NO								

If yes, please provide full details of each case - including case number, year, name of employer, country, cause of litigation, matter in dispute, disputed amount, judgements and awards.

TRADE REFERENCES										
Company or Client Name			Contact Name			Telephone Number				
1										
2										
TRADE EXPERIENCE										
	Type or N	ature of Work Completed	C	Company or Client Name			Year	Contract Value		
1										
2	2									
			'							
I am a duly authorised representative of the above mentioned company and certify that the information submitted and all attachments are correct. I understand that any discrepancies entitle SACU to reject the registration.										
I hereby confirm that neither the Primary Contact, Sales/Technical Contact nor Billing/Accounts Contact above has a personal relationship with any employee of the SACU Secretariat that could be deemed as a conflict of interest.										
Full	Name:									
Pos	ition Held:	eld:								
Signature:				Date:						
 The following certified documents must be submitted with this form: A Certificate of Company Registration from the Ministry of Trade & Industry A Certificate of Good Standing for Tender Purposes from the Ministry of Finance - Inland Revenue A Certificate of Good Standing from the Social Security Commission Proof that the majority owner(s) of the company are citizens of a SACU Member State (copy of ID/Passport) A copy of the latest audited annual financial statements, unless registered as a close corporation where the annual financial statements is signed by the Accounting Officer. The form and supporting documents must be returned to The Procurement Officer: Southern African Customs Union (SACU) Secretariat, PBag 13285, Windhoek, Namibia, 9000 Erf 8531 Corner Feld & Lazarett Avenue, Windhoek, Namibia Tel: +264 61 295 8000/37 - Email: Leon. Esterhuizen@sacu.int Vetted by Tender Committee - Meeting Number 										
ADDITION OF VENDOD IN CAD DA										
ADDITION OF VENDOR IN SAP B1				Signature				Date		
Recommended - Procurement Officer										
Approved - TC Chair Person										
Approved - TC Chair Person										
SAP	B1 VENDOR (CODE								