## **VENDOR REGISTRATION FORM**



Disclaimer: World Vision shall maintain in confidence all information provided by the Supplier. This information is for internal use ONLY & will not be share with a Third Party.

The World Vision Partnership follows a "zero tolerance" rule with regard to corruption (including fraud).

Section 1-General Infor	mation_						
1.1-Business Type							
Goods			Services		c	Consultancy	
Commercial / Company	Name:						
I.2-Detailed Business A	ddress:						
1.3-Business Contact Do	etails						
Name Posit		tion Phone		Number	Email Address	Other (fax, PO Box, Website)	
I.4-Business Profile ( Co	omplete as a	pplicable )					I
Year Established Number of employees		employees	Ministry of finance Number ( VAT Number)		Ministry of economics Number (License Number)	Business Owner Name	Names of members the board of Directors
I.5-Working Languages:	English		Arabic	French			
I.6-Technical Documents av	ailable in:		English		Arabic	French	
1.7-Supporting Docume	entation Ava	ilable ( Place	e X and Atta	ıch Docume	nt )		
				ent Not ilable			
Commercial Register		Attached		Avai	nable		
Commercial Circular							
VAT Document							
Authorized Signatory I	D						
Board Members ID							
Financial Report/ Audit	Report						
Section 2: Financial Info	ormation_						
2.1 Annual Value of Tot	al Sales for t	the last 3 Ye	ars				
Year 200 Year 200							

Year 200\_

2.2 Bank Details	2.2	Bank	Details
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Bank Name:	
Swift/BIC Address:	
Bank Account Number:	
Account Name:	
IBAN Number:	
Currency:	



Account Name:				1	
IBAN Number:				1	
Currency:				1	
Section 3: Technical Ca	pability and Information	on on Goods	/ Services Offered	1	
3.1 List below your cor	∙e Goods/Services offer	ed			
I		6			
3		8			
Section 4: Experience					
4.1 Recent Contracts w	ith International Aid O	rganization	s and/or the United Natio	ns:	
Organization	Value in USD	Year	Goods/Serv	ices Supplied	Destination
Section 5: Other		•			
Certification:					
-			litions, a copy of which hages details will be provide	•	and warrant that the information
Name		_	Functional Title		
Signature		_	Date		
N.B.: Completing this form	it does not automatically	mean you will	be added to our Vendor Dat	tabase.	

## All Suppliers/Contractors/ Consultants must provide copies of the following if available:

- 1. Certificate of Business Registration / Commercial Register/ Commercial Certificate
- 2.VAT registration Certificate
- 3. Valid Tax compliance/clearance certificate
- 4. Current trade license (if applicable)
- 5. Registration certificate in any specialized e.g. for pharmaceuticals.
- 6.References /Letter of recommendation from previous Contracts successfully executed
- 7.Detailed Company profile.
- 8. Must have a minimum of three years experience preferably with similar organizations (NGO).
- 9. Must provide list of 3 references/clients (attach evidence i.e. copies of contract document from client or orders for the last three years that best illustrate your best performance.)
- $10. \\Must \ demonstrate \ financial \ capability \ , with \ a \ recommendation \ from \ a \ reputable \ bank$
- 11.Must submit bids within the specified time frame.
- 12. World Vision will carry out site visits to all potential suppliers prior to final approval