

National Aquaculture Development Authority of Sri Lanka
Supplier Registration Form

For office use only

Supplier No.

<i>Item No.</i>	
(Clearly Mention the relevant item number for which this suppliers registration is submit)	

SUPPLIER INFORMATION

01 GENERAL INFORMATION

I	Supplier Name			
II	Authorized person			
III	Contact person			
IV	Website			
V	Email			
VI	Registered Address			
VII	Phone Number	Mobile		Fax Number

02 PAYMENT INFORMATION

I	Bank Name			
II	Account No.			
III	Credit Limit			
IV	Payment Term	15 Days	<input type="checkbox"/>	Payment Method
		30 Days	<input type="checkbox"/>	
		Others :	<input type="checkbox"/>	
				Cheque : <input type="checkbox"/>
				Others : <input type="checkbox"/>
V	Billing Address			
VI	Phone Number	Mobile		Fax Number
VII	Email			

03 DOCUMENT CHECK LIST

	Required Documents	No and Validation Date		
I	<input type="checkbox"/> Company Registerton Number			
II	<input type="checkbox"/> Tax Registration Number			
III	<input type="checkbox"/> VAT Number			
IV	<input type="checkbox"/> ID Card of Authorized person			

04 SUPPLIER

The undersigned hereby stated that the information provided herein is true, valid and correct on the date of submission.

<input type="checkbox"/>	Supplier Signature	Nmae :		
		Date :		
		Signature :		

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<input type="checkbox"/>	Verified and Checked	Nmae :		
		Date :		
		Signature :		
<input type="checkbox"/>	Supplier Account Created	Nmae :		
		Date :		
		Signature :		

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