

SUPPLIER REGISTRATION FORM



Ministry of Finance

Procurement Policy and Advisory Division (PPAD)

Telephone : 22219900

Finance House, 3rd Floor, Office Number 3020/3016

ATTACHMENTS

1. TRADERS LICENCE – CERTIFIED AT SOURCE
2. TAX CLEARANCE CERTIFICATE – CERTIFIED AT SOURCE
3. COMPANY PROFILE

1.12 Principal service provided:

1.12.1:

1.12.2:

1.12.3:

1.12.4:

2.0 Business/Company's Bank Account Details for Payment Transfers

Please provide details of the business/company's bank account to which you would like payment to be made by Government (**up to 3 accounts are allowed**)

2.1 Bank Name:

2.2 Branch Name:

2.3 Branch Code:

2.4 Business/Company's Bank Account Number:

2.5 Bank Account Name:

2.6 SWIFT Code:

BANK DATE STAMP

3.0 Business/Company's Bank Account Details for Payment Transfers

Please provide details of the business/company's bank account to which you would like payment to be made by Government:

3.1 Bank Name:

3.2 Branch Name:

3.3 Branch Code:

3.4 Business/Company's Bank Account Number:

3.5 Bank Account Name:

3.6 SWIFT Code:

BANK DATE STAMP

4.0 Business/Company's Bank Account Details for Payment Transfers

Please provide details of the business/company's bank account to which you would like payment to be made by Government:

- 4.1 Bank Name:
- 4.2 Branch Name:
- 4.3 Branch Code:
- 4.4 Business/Company's Bank Account Number:
- 4.5 Bank Account Name:
- 4.6 SWIFT Code:

BANK DATE STAMP

Please be informed that the provided information especially the bank details would be valid only if it has been confirmed by the bank with a date stamp.

5.0 Declaration by supplier/representative:

Ideclare that the information provided is true, correct and binding.

Signature of supplier/representative:

SUPPLIER DATE STAMP

6.0 Registration Form should be returned to:

Procurement Policy and Advisory Division
Level 3/Third Floor, Room 3017
Ministry of Finance
Finance House (Opposite Queen Elizabeth II Hospital)
High Court Road
Maseru 100