**FORM 1: APPLICATION FOR VENDOR REGISTRATION**

|  |  |
| --- | --- |
| Project |  |
| Announcement No. |  |

|  |
| --- |
| **VENDOR INFORMATION FORM** |
| 1. ENTITY TYPE | [ ]  | Sole proprietor  | Only the types specified here are considered as business legal entities. |
| [ ]  | Company |
| [ ]  | Partnership |
| [ ]  | Cooperative |
| 2. REGISTRATION NO.  |   | Enter respective registration number. |
|
|
| 3. GST NO. |  |
| 4. NAME OF VENDOR |  |
| 5. CONTACT NO.  |   FIXED |  | MOBILE |   |
| 6. EMAIL ADDRESS |   |
| 7. FULL REGISTERED ADDRESS |  |
|
|
|
| **BUSINESS NAME** |
| 8. REGISTERED NAME |  |
| **CONTACT PERSON** |
| 9. NAME |   |
| 10. PERMANENT ADDRESS |  |
|
|
|
| 11. MOBILE NUMBER |   |
| 13. SIGNATURE | 14.STAMP |
|
|

* Provide Building / house names, floor, apartment no., road, atoll and island for address fields.
* This form should be submitted with the proposals
* All fields are mandatory