# SRI LANKA STATE TRADING (GENERAL) CORPORATION

		- 1
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## **REGISTRATION SUPPLIERS (DUTY FREE LIQUOR)- 2023**

2023-January to 2023-December (Registration No: STC/Pro/DFS/01)

(Registration Fee Rs. 15,000, Pay Online and Attach a copy)

TYPE OF	BUSINESS: M / SA/SD/ D / A/ P / R (PL SEE BELOW):		
Ma	anufacturer Sole Agent Sole Distributor Distributor Agent		
Pa	artner Reseller		
SECTION	N A. SUPPLIER DETAILS .		
1.	Name of the Company:		
2.	Business registered address:		
3.	Business registration Number: Date of Registration :		
	Type of Registration		
F	Proprietor Partnership Private Limited Company Public Limited Company		
	(Copy of Certificate of Incorporation should be attached) – (A 01)		
4.	Company Postal Address:		
5.	Contact Person(Name)		
6.	Contact Person ( Designation) Web Site:		
7. (	Contact Number (Corporate) Mobile Number Mobile Number		
1	Fax Number :		
8.	Quotations Calling Email Address 1: Email Address 2:		
ı	Fmail Address 3: Fmail Address 4:		

(Position)			(Posit	(Position)			
(Address)			(Addr	(Address)			
Contact No :			Conta	Contact No :			
3(Name)			4(Nar	ne)			
(Position)			(Posit	(Position)			
(Address)			(Addr	(Address)			
Contact No :			Conta	Contact No :			
ECTION B. FINANCIA	L STANDING&	STAFF.					
. Audited financial st			(04) vearsas	helow need t	o he attached (R	01)	
Following Summery		•	(O+) yearsus	below fieed t	o be attached.	01,	
Financial Data	2017 ( Audited)	2018 ( Audited)	2019 ( Audited)	2020 ( Audited)	2021 (Management Accounts Up to August 2021)	Annual Average	
Annual Revenue					7.00,000 20227		
Profit before tax							
Balance Sheet Status at year							

9. Directros of the Firm (As in the Form (1/20/40) as applicable / Attach a Copy of Directors

2(Name) .....

Details of the Executive Board: Chairman, Directors and Chief Executive Officer.-(A 02)

Consent) ( Required – certified ID Copies of Directors)

1(Name) .....

Equity

Liabilities

2. De	tails of company's bankers.					
i.l	Bank Name :		Branch :			
А	ccount Number :	(Bank Cred	ditials Letter needs to be Attached) (B02)			
ii.	Bank Name :		Branch :			
А	ccount Number :	(Bank Cred	ditials Letter needs to be Attached)			
2 C+0	ff dataile fautha accuract cons					
3. Sta	ff details for the current year	and the previous years.				
*	Permanent Staff	Last Year	Current Year			
E	xecutive					
Т	echnical					
S	ales man					
S	upervisors					
C	Other staff					
* Ple	ase attach a list of Employees	with Technical Satff – ( B	03)			
SECTI	ON C - QUALIFICATIONS AN	ID EXPERIENCE TRADING				
SECTI	ON C QUALITICATIONS AN	D EXI ENIENCE TRADING	•			
	01. <b>Summary</b> of Supplies I	ast Year 2020/2021				
Se.No	Product	Average Experience	Suppliers durng Last 3 Years			
01						

Se.No	Product	Average Experience	Suppliers Years	durng	Last	3
01						
02						
03						
04						
05						
06						
07						
08						
09.						
10.						
11.						
12.						
13.				•	•	

### 02. <u>Detailed List</u> of <u>Major</u> Supplies for Trading during Last 3Years

S.N.	Product	Quantity	Value of Suppliers	customer
01				
02				
03				
04				
05				

• Attach Proof of Purchase for above –(C 01)

### 03. Details Duty Free Bond Faclity Available

Se. No	Type of Facility	Address and Contact Details of Stores of Approved Bond	Total Value approved	Stock value
01				
02				
03				
04				
05				

• Attach Full details of Facilities – ( C 03)

#### 04. PRODUCTS AVAILABLE FOR IMMIDIATE SUPPLY

	Product With Specification Model	<b>Production</b> Year	Quantity
01			
02			
03			
04			
05			
06			
07			
08			
09			
10			
11			
12			

<sup>\*</sup> Please attach Full Specifications of Products with Certifications – (C 05)

05. Manufact	urer Authorization Letter/Category;		
	[] [2.Sole Distributor in Territory][3. Distributor][4.Agent][5.Partner][6.Reseller]  Ittached completed Authorization Letter/Letters in attached format		
i.	Agent/ Distributor Since : ( Date of Appointment of Distributor)		
ii.	Name of the Mother Manufacturing Company :		
iii.	Address of the Mother Manufacturing Company:		
iv.	Contact Person ( Name )		
v.	Contact Number : ( Office ) ( mobile)		
vi.	email address :		
	imitment: Eipt of STC Purchase order, I/We have ability of supplying required quantity with Expected ard products, at a competitive rate in the market with in the agreed time period.		
Name: Title:			
Signature: Da	te:		
(Place Official	I Stamp Here)		
RS: 1500	0.00(Registration Fee)		
Attach Proof of Payment / Payment Slip Here <mark>( C 07)</mark>			