STC SUPPLIER REGISTRATION APPLICATION (GOODS) - 2024

2024-January to 2024-December (Registration No: STC/Pro/RegSup2024/G)

Registration Category: For OS/ICT/EE/AP/CH/FMCG/AS/ME/HR/CA/MU/SW CATEGORIES

CATEGORY:

00			
(Registra	ation Fee Rs.3000 for Each	Category Number, Pay Online ar	nd Attach a copy)
TYPE OF BUSINESS: N	// / SA/ SD/ D / A/ P / R	(PL SEE BELOW) :	<u></u>
Manufacturer	Sole Agent	Distributor	Agent
Partner	Reseller		
Note: Please attach ti	he proof documents her	rewith	
SECTION A. SUPP	LIER DETAILS		

Details	Supplier Response
Company Registered Name	
Registered Business Address & Contact	
Details	
Business Registration Number	(Please Attach copy of Business Registration)
Date of Registration	
Type of Business Registration	
(Proprietor/ Partner /Pvt Ltd /Public Limited)	

Copy of Certificate of Incorporation should be attached

Contact	Supplier Response
Company Postal Address	
Contact Person Name	
Contact Number Direct /	
Mobile	
Designation	
Fax	
Quotation calling E – mail	
address 1	
Quotation calling E – mail	
address 2	
Quotation calling E – mail	
address 2	
Web Site	

STC Supplier Reg 2024 - (Goods/Items Supply) - Page 1 of 6

Directros / Partners of the Firm (As in the Form (1/20/40) as applicable / Attach a Copy of Directors Consent) (Required – certified ID Copies of Directors / Partners)

Details of the Executive Board: Chairman, Directors	•
1(Name)	2(Name)
(Position)	(Position)
(Address)	(Address)
Contact No :	Contact No :
3(Name)	4(Name)
(Position)	(Position)
(Address)	(Address)

SECTION B. FINANCIAL STANDING& STAFF.

1. Audited financial statements for the past four (04) years as below need to be attached. Following Summery needs to be completed.

Financial Data	2018	2019	2020	2021	2022	Annual
	(Audited)	(Audited)	(Audited)	(Audited)	(Management	Average
					Accounts Up to	J
					August 2023)	
Annual						
Revenue						
Profit before						
tax						
Balance Sheet						
Status at year						
end:						
Equity						
Liabilities						

2. Details of company's bankers.

i.Bank Name :	Branch :
A	
Account Number :	(Bank Creditials Letter needs to be Attached)
ii.Bank Name :	Branch :
Account Number :	(Bank Creditials Letter needs to be Attached)

3. Staff details for the current year and the previous years.

* Permanent Staff	Last Year	Current Year
Executive		
Technical		
Sales man		
Supervisors		
Other staff		

* Please attach a list of Employees with Technical Staff – (B 03)

SECTION C - QUALIFICATIONS AND EXPERIENCE TRADING

01. Summary of Supplies Last Year 2021/2022 / 2023 August

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

S.N.	Product	Quantity	Value of Suppliers	Customer Details
01				
02				
03				
04				
05				
06				
07				
08				
09				
10				

02. Detailed List of Major Customersduring Last 3Years

- Attach Proof of Purchase for above –(C 01)
- Attach List of Major Clients –(C 02) (Use a Duplicate of This Page if supplier requesting for registration more than 1 category)

03. Production , Processing and Storage Capacity

	Type of Facility (Production / Processing/ Stores/Stock)	Address and Contact Details of Stores and Production Facilities	Manufacturing Capacity	Storage Capacity
01				
02				
03				
04				
05				
	ale facilitate the of fractions			

Attach Full details of Faclities – (C 03)

Vat Registration Cetificate : (Please attach a Copy)

VAT Registration No : Certificate Number : Validity Period :

04. PRODUCTSAVAILABLE FOR IMMIDIATE SUPPLY

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

* Please attach Full Specifications of Products with Certifications – (C 05)

05. Manufacturer Authorization Letter/Category;

[1. Sole agent] [2.Sole Distributor in Territory][3. Distributor][4.Agent][5.Partner][6.Reseller] Required to attached 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 :
vii.	Facilities Available with Distributor that can be utilized Free of Charge (FOC)

I, the undersigned hereby certify that information provide in this form is correct and true according to my knowledge and i undestand that in an event of providing false information may result in blacklisting of my company for Sri Lanka Government Tenders.

Supplier Commitment:

Based on receipt of STC Purchase order, I/We have ability of supplying required quantity with Expected quality standard products, at a competitive rate in the market within the agreed time period.

Name: Title:

Signature: Date:

(Place Official Stamp Here)

RS: 3000.00(Registration Fee for each category)

Attach Proof of Payment / Payment Slip Here(C 07)