SRI LANKA STATE TRADING (GENERAL) CORPORATION

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Registration for General Services (Categories 1-20) - 2024

(Registration No: STC/Pro/RegSup2024/GS)

| Services Registration N | Number: SS/ (Categ | gories from 1 to 20) |
|----------------------------|----------------------|--|
| CATEGORY Number | | |
| | | |
| (Registration Fe | ee Rs. 3000 for E | ach Category / Online Payment Available |
| | Visa/Master | Credit or Debit Card) |
| | | |
| SECTION A. SERVICE I | PROVIDER DETAILS | |
| | | |
| Details | | Supplier Response |
| Company Registered Nam | ıe | |
| Registered Business Addr | oss & Contact | |
| Details | ess & contact | |
| Business Registration Nur | mher | (Please Attach copy of Business Registration) |
| Date of Registration | | (Fredse Actach copy of Business (Cepistration) |
| Bute of Registration | | |
| Type of Business Registra | tion | |
| (Proprietor/ Partner /Pvt | Ltd /Public Limited) | |
| Copy of Certificate of | Incorporation should | d 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 | | |
| Weh Site | | |

| Dir | Directors Consent) (Required – certified ID Copies of Directors/Partners) | | | | | |
|-----|--|--------------|--|--|--|--|
| | Details of the Executive Board: Chairman, Directors and Chief Executive Officer. | | | | | |
| | 1(Name) | 2(Name) | | | | |
| | (Position) | (Position) | | | | |
| | (Address) | (Address) | | | | |
| | Contact No : | Contact No : | | | | |
| | | | | | | |
| | 3(Name) | 4(Name) | | | | |
| | (Position) | (Position) | | | | |
| | (Address) | (Address) | | | | |
| | Contact No : | Contact No : | | | | |
| | | | | | | |
| | | | | | | |

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

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 | _ |
| | | | | | August 2023) | |
| Annual | | | | | | |
| Revenue | | | | | | |
| | | | | | | |
| Profit before | | | | | | |
| tax | | | | | | |
| Balance Sheet | | | | | | |
| Status at year | | | | | | |
| end: | | | | | | |
| Equity | | | | | | |
| | | | | | | |
| Liabilities | | | | | | |
| | | | | | | |

| 2. | De | tails of company's | bankers. | | | |
|------|------|--------------------------------|--|-------------------------------------|--|--|
| | i.Ba | ank Name : | | Branch : | | |
| | Acc | count Number : | (Bank Creditials Letter needs to be Attach | | | |
| | ii.B | ank Name : | | Branch : | | |
| | Acc | count Number : | (Bank Cred | itials Letter needs to be Attached) | | |
| 3. | Sta | aff details for the cu | rrent year and the pre | vious years. | | |
| | * | Permanent Staff | Last Year | Current Year | | |
| | Ex | ecutive | | | | |
| | Te | chnical | | | | |
| | Sal | les man | | | | |
| | Su | pervisors | | | | |
| | Ot | her staff | | | | |
| | | N C - QUALIFICATIONS A | ND EXPERIENCE IN PROVIDE | NG SERVICES . | | |
| | | 01. Summary of Supplies | Last Year 2021/2022/2023 A | August | | |
| Se.I | No | Product | Average Experience | Suppliers durng Last 3 Years | | |
| 01 | | | | | | |
| 02 | | | | | | |
| 03 | | | | | | |
| 05 | | | | | | |

| 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 Major Customers during Last 3Years

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

- 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 with Transport /Lorries with Capacity

| No | Type of Facility (Production / Processing/ Stores/Stock/Transport Lorry/ Container Lorry for Cargo Clearance) | Lorry Numbers /Address and Contact Details of Stores and Production or Transport Facilities for Cargo Clearance | Engine Capacity | Storage Capacity |
|----|---|---|-----------------|---------------------|
| 01 | | | | |
| 02 | | | | |
| 03 | | | | |
| 04 | | | | |

• Attach Full details of Facilities – (C 03)

| Certi | ficate Number : | | | | | | |
|-------|-------------------------------------|------|---------|--|--|--|--|
| Valid | Validity Period : | | | | | | |
| 04. | 04. SERVICES OFFERED BY THE COMPANY | | | | | | |
| | SERVICES CARRIED OUT BY THE COMPANY | RATE | REMARKS | | | | |
| 01 | | | | | | | |
| 02 | | | | | | | |
| 03 | | | | | | | |
| 04 | | | | | | | |
| 05 | | | | | | | |
| 06 | | | | | | | |
| 07 | | | | | | | |
| 08 | | | | | | | |
| 09 | | | | | | | |
| 10 | | | | | | | |
| 11 | | | | | | | |
| 12 | | | | | | | |

03 UPDATED Vat Registration Cetificate: (Please attach a Copy)

VAT Registration No:.....

^{*} Please attach Full List of Provided services with rates— (C 05)

05. Building or Construction Service Provider - Certifications (CIDA / ICTAD) i. Certificate Number: (C 06) (CIDA / ICTAD certificate copy to be attached) ii. ICTAD / CIDA Regisytered Contractor Since : (Date of Registration) iii. Type Of Registration: iv. Level: Contact Person (Name) Contact Number: (Office)......(mobile)..... vi. vii. email address: Facilities Available for Construction Related Services viii. 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 Official order, I/We have ability of Providing Services within Expected quality standard works, at a competitive rate in the market within the agreed time period. Name: Title: Signature: Date:

RS: 3000 Registration Fee for Each Category

(Place Official Stamp Here)

Attach Cashier Receipt or Online Payment Emailed Receipt Here (C 07)