

<u>APPLICATION FOR REGISTRATION OF LOCAL & FOREIGN SUPPLIERS FOR GOODS / SERVICES AND CONSTRUCTION WORKS FOR THE YEAR – 2024</u>

2.	Name of the Insti Registration Num Date of Registrati	nber	:			
	(Please attach a	certified copy (of the Company R	Registration Certific	cate)	
	Type of Business (a) Limited Liabi (d) Other - (pleas profile document	ility Company se specify)		ership	Sole Proprie	-
5.	(ii) Mailing Add	ace of Business dress cal Address) Mobile Nos ress	: : : :			
6.	Staff Strength:			☐ Between 10-50☐ Between 500-100		ween50-100 ove 1000
	Details of Board as requested.	l of Directors	& copies of Natio	onal Identity Card	l / Passport	- Please provide
8.	Share Holders d	letails <i>-Please</i> j	provide as requesi	ted.		
				<i>ial Statement</i> (inclu h 1 year Bank State		ement Accounts)
10.	Factory Address(es) (If Applica	ble only)			
	Details of future the Organization)	_	es of the Contact	Person from your	organization	ı (Authorized by
	Name/s	National ID No	Designation	Tele/Mobile Nos	Fax No	Email (compulsory)

12.	•	D / VAT No AT Certificat				•••••		
13.		-		-	t year? Yes			
14.	Name and A	Address of the	e Chief Exe	cutive Office	er / Partners/ I	Proprietor		
15.	If "yes" how	w many princ	cipals are be	eing represer	gent of Foreignted by you? n for each pr	(P		
16.	•	eking registra gistration Nu		•	f Constructio	n Work? Y	Yes/No	
	CIDA NO:							
	Present Reg	gistered CIDA	A Category:					
17.	Please prov	ide your Ban	ker's inforn	nation (Attac	h Original co	py of a lett	er from the	Banker)
		Bank		Bra	nch		Account 1	No
18.	A. The deta	ils of Catego	ry Fees paid	d to the Bank	of Ceylon			
	Name of t	the Branch (F	BOC) :			Date	:	
	B. Total am	ount paid as	category fee	e Rs. / US\$:	:	. C. No of	Categories .	
		Cas	h Deposit S	Slip attach he	re/SLC Paym	ent Slip No)	
19.		•		•	s sought? Plea of Categories:			orrectly (see
19.		•		•	•			orrectly (see
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19.	example be	low before fi	Il categories	s Number o	•			orrectly (see
19.	example be	•	Il categories	s Number o	•			orrectly (see

The portant: If requested all the documents have in rejected automatically. For Office Date Received:	Use Only Serial Number: SLC //2024 * Insufficient Data - Yes / No Asantha Dassnayake Manager Administration
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	oi veen attacnea to the application which will be
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Date:	
Please affix Company Seal (Rubber Stamp)	
Signature/s of the Directors/ Partners/Proprietor:	
Name of the Director/ Partner/Proprietor:	
Further I/We agree to immediately notify SLC any chare made thereto.	nanges to the above information as and when changes
Further I/We hereby confirm that I have read and u General Instruction issued with the application for reg for the year 2023 and I agree with the terms and cond	istration of Local and Foreign Suppliers / Contractors
information provided and attached herein.	ovided by me/us is true and accurate including the
I/We hereby declare that the above information pro-	
20. Quality Certifications (If available, please at	

Attach product brochures (if any), authorization letters, distributorships & agency details to

substantiate your capacity.