

VENDOR PROFILE FORM

Requested information is for US Embassy's internal use only and will be treated as confidential.

All pages to be completed by Vendor and submitted to US Embassy.

Section 1: General Information (Please provide all documentation in English)

1.	Name of Company :	_____
1.1	Parent Company (if applicable) :	_____
1.2	Name of Director(s):	_____ _____ _____
1.3	Name of Accountant / CFO	_____
1.4	Is Owner Handicapped / a Woman?	YES / NO / BOTH (Circle applicable)
2.	Full Address :	_____
	Street	_____

	P.O. Box	_____
	State/County	_____
	Postcode	_____
	Country	_____
3.	Telephone (incl. country code):	_____
4.	Fax/Telex (incl. country code):	_____
4.1	E-mail address (if any):	_____
4.2	Internet home-page (if any):	_____
5.	Name and title of contact person(s) authorized to deal on company behalf:	_____ _____
5.1	Cell phone no. of contact person(s)	_____
6.	Type of organization (one X only)	
	State Enterprise: <input type="checkbox"/>	Private Company: <input type="checkbox"/>
		Other (Please specify): <input type="checkbox"/>

7. **Activity category**, (mark X where applicable)
- | | | | |
|--------------------|--------------------------|-------------------------|--------------------------|
| Manufacturer : | <input type="checkbox"/> | Consultant : | <input type="checkbox"/> |
| Printer : | <input type="checkbox"/> | Retailer: | <input type="checkbox"/> |
| Trading company : | <input type="checkbox"/> | Forwarder: | <input type="checkbox"/> |
| Authorized agent : | <input type="checkbox"/> | Other (please specify): | _____ |
8. **If Agent/Trading House, do you hold sole/exclusive rights/license?** Y / N
(If Yes, please state name and address of Principals and attach documentation):

9. **Year established :** _____ **9.a No. of full-time employees :** _____

Section 2: Financial Statement

10. **Registration/Incorporation Number:** (Please provide certified copies of Incorporation Certificate & all other required documents)
- a. **Trade Licence No.:** _____ **Date of issue:** _____ **Period of validity:** _____
- b. **Certificate of Incorporation (if applicable):** _____
- c. **Income Tax Clearance Certificate:** _____
- d. **SNPF Compliance Clearance certificate :** _____
11. **Bank name and physical address** _____ **13.Account name and number.e.g. current a/c:0125488885**

- Branch code:** _____
- VAT#/TIN (if VAT registered):** _____
12. **Financial Statement:** Please attach a copy of your latest financial Statement/Annual Report.
13. Pending lawsuit if any: _____ Y/N (If Yes, please attach details)

Section 3: Activities

14. **Previous contracts** (during the last 1 year) **with US Embassy/International/Governmental Organizations/Private Companies**, for below products/services :
(Please attach a separate list if necessary. Please provide at least three references):
- | | Contract ref. no. | Date | Value | Product | Organization Name/address. |
|----|--------------------------|-------------|--------------|----------------|-----------------------------------|
| 1) | _____ | _____ | _____ | _____ | _____ |
| 2) | _____ | _____ | _____ | _____ | _____ |
| 3) | _____ | _____ | _____ | _____ | _____ |
- 14.a **Product/service Category (refer to US Embassy list of categories):** _____
15. **Main products/services offered :** _____
(Please attach/provide complete and detailed Product List or Catalogue)
16. **Storage/warehousing capacity (in square meters if applicable):** _____
17. **Local representation :** _____
(Please attach list of countries where your local representative will provide warranty services on products/services purchased from you - provide complete addresses of your subsidiaries/agents where applicable)

Section 4: Others

18. **Approved Standards** (ISO, FDA, GMP, etc) for production factory (if applicable):
_____ (Certificates of approval to be attached).
19. **Is a documented quality assurance policy being applied by your Company/Organization :**
(circle as applicable) **Y / N**

If yes please indicate name, title and telephone number of authorized contact person:

- 20. Membership of National/International Associations?**
(Circle as applicable) **Y / N** (If yes, please enclose list of names)
- 21. Is your company and your premises covered by liability insurance?**
(Circle as applicable) **Y / N** (If yes, please provide copy of relevant document):
- 22. Does your company have a documented environmental policy?**
(Circle as applicable) **Y / N** (If yes, please attach copy of relevant document)
- 23. Are any personnel/shareholders/Management/staff of your Company related to any staff member(s) of the US Embassy?** If yes, please list the name(s) of the related staff member(s) and their location.

- 24. Provide five (5) reference companies / client (use a separate sheet):** _____

I hereby certify that the information provided above and in all the annexure is correct and that no person in any connection with this establishment, as a supplier for providing material, supplies or services, or as a principal or employee, is employed by the US Embassy, or barred by US Embassy.

Name: _____ **Date:** _____

Title: _____ **Signature:** _____

- LIST OF ATTACHMENTS:
- 1) Copies of registration documents
 - 2) Copy of tax clearance certificate
 - 3) Copy of latest financial statement
 - 4) List of five (5) references