YOUR LOGO

VENDOR REGISTRATION

Vendor registration form

Please complete every field and return to **procurement email**. Payment details are collected separately through the supplier portal.

COMPANY

Registered company name

Trading name

Registered address

Year established

Website

Tax registration number

CONTACTS

Account manager

Escalation contact

Accounts contact

Phone

SERVICES AND COVERAGE

Services offered

Cities and regions covered

Number of staff

Typical response time

DOCUMENTS ATTACHED

- [ ] Certificate of registration
- [ ] Tax registration certificate
- [ ] Insurance certificate
- [ ] Two client references
- [ ] Signed code of conduct

NEXT STEPS

Declaration and signature

Choose a package, sign below and we start on **date** .

✓ Accept and sign

Accepted for **Client company**
Name, signature and date

For **Your company**
Name, signature and date