

## World Vision International Nepal

## **Supplier Registration Form**

<b>Section I: General Information</b>							
I- Name of Company (Legal)							
2-Address: District		3- Mailing address (if different)					
VDC/ Ward No							
Postal Code							
Street							
P.O. Box Number							
Country							
4- Telephone	hone						
6- Website	Vebsite						
8- Contact Name and Title:			9- Email:				
10. Nature of f Business							
Authorized Agent	Authorized Agent Manufacturer		Trader				
Contractor:	Retailer		Other:				
	1-		6-				
Please list your core goods/services.	, 2-		7-				
works offered:	3-		8-				
WOLKS Offered.	4-						
	5-						
11. Year of established		12. Number of full time staffs					
12. Number of Branch		13. Location:					
14. VAT/ PAN Number:		15. License no./State, where registered					
16. Working Language: English	Nepa	li Other					
17. Does your company have a Code of Conduct?							
18. Please provide a copy of the cor	npany's most recen	t Annual or Audit	ed Financial Report.				
10.0	1 . 1 1	1 1.1	1 ( 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
19. Does your company have CSR r							
policy, energy policy, climate policy or is a member of Global Compact? Please state which policies							
Section 2: Financial Information							
20. Annual Value of Total Sales for t	<u>-</u>	M) in NIPR					
	•	· · · · · · · · · · · · · · · · · · ·	Yoar NIPP				
Year NPR Year NPR Year NPR  18. Annual Value of Export Sales for the last 3 Years: (000) in NPR							
Year NPR Yea	,		Year NPR				
21. Bank Name	22. A/C Name						
3. A/C Number 24. Branch address							
25. Swift code							
Payment term							
Section 3: Technical Capability and Information on Goods / Services Offered							
27. Do you offer customers a secure, web-based ordering & tracking system? Yes No							
28. List of international quality assurance certification held by   1-							
your company(a copy of each certificate shall be enclosed): 2-							
, , , , , , , , , , , , , , , , , , , ,	3-						
		•					



## Annex-16

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		-		4-	-			
29. List of local and national quality assurance certification held by your company (a copy of each certificate shall be enclosed): e.g. ISO 9000 or Equivalent			1- 2- 3- 4-					
30. List below up to five (5) of your core Goods/Services offered:								
SN	Description Brand/Manufacturer , Model			National/International Quality Standard to which item conforms				
I								
2								
3								
4					-			
5		-			-			
Section	n: 4- Experience							
31. Rec	ent Contracts with Interr	national Aid Org	anizations and/o	or the United Nations:				
Organiz	ation:	Value: NPR	Year:	Goods/Services Supplied:	Destination:			
				•				
32. To v	which Countries has your	Company expo	rted and/or mai	naged Projects over the last 3 Year	rs (in particular			
	ing countries)?			-				
	ment Terms:	Agreed	Disa	gree				
If disagr	ee, Please state your pay	ment terms:						
WIN standard payment for supply, service and works contracts is 100% payment within 30 days after delivery of								
				is 100% payment within 30 days an iments. Prepayment is in general o				
_	a prepayment guarantee				my acceptable			
	RTIFICATION:	20 / 01 6 01.0 10	шошо от сло р					
I, the undersigned, hereby accept the basic Terms and Conditions, a copy of which has been provided to me and								
warrant that the information provided in this form is correct, and in the event of changes, details will be provided as								
soon as possible:								
C:-matuus								
Signatur Name	е							
Designa	tion							
Date								
	Completing this form	it does not suit	omatically moss	suppliers will be added to our A	Approved Supplier			
	<b>NOTE:</b> Completing this form it does not automatically mean suppliers will be added to our Approved Supplier Database. The WVIN reviews and evaluates submissions and contacts prospective suppliers as necessary.							