



JOHANNITER

Appendix 2: Vendor selection form

Section 1: Company/Individuals Details

Name of Company/Individual:		
Name of Contact Person and Title:		
Registered Address (Plot/House No.)		
Street:		
Postal Code:		
City:		
Country:		
Telephone:		
Email address:		
Website address:		
Type of Business: (Tick the relevant box)	<input type="radio"/> Company <input type="radio"/> Partnership	<input type="radio"/> Joint Venture <input type="radio"/> Other (specify):
Company Registration Number: (Attach copies of certificate of incorporation, Articles and memorandum of association)		
Trading License Number: (Attach Trading license, certificate from line ministry if applicable)		
Tax Identification Number: (Attach valid Tax Registration Certificate)		
Tax Clearance Certificate Number: (Attach valid Tax clearance Certificate)		
Working Languages:		



Section 2: Nature of Business Operations

No.	Description	Response (Provide extra sheet if required)
1	Outline the scope of your business activities relevant to the category of goods, works and services that you are bidding for.	
2	How many years have you been carrying out this type of business?	
4	Do you intend to use a subcontractor if awarded this contract? If yes, outline how you will ensure quality control and provide details of sub contractor including legal documents.	
5	What is your preferred mode of payment? (Tick your preferences)	<input type="radio"/> Cash <input type="radio"/> Bank Transfer <input type="radio"/> Checque
6	What currency does you company transact in? (Tick your preferences)	<input type="radio"/> USD <input type="radio"/> AFN <input type="radio"/> Others.....
7	What are your terms of payment?	<input type="radio"/> 30 days after delivery of invoice <input type="radio"/> 15 days after delivery of invoice <input type="radio"/> Advance <input type="radio"/> Others.....
8	Provide contact of key personel authorised to sign/accept purchase orders/contracts.	Name:..... Title/Position:..... Contact:.....

