UNIVERSITY OF RUHUNA
REGISTRATION OF SUPPLIERS FOR 2014
SPECIMEN APPLICATION FORM

01. Name and Address of the Business Organization

Name :-

Address :-

02. i. Telephone No./s:-

ii. Fax No. / Nos. :-

iii. E-mail Address :

03. Nature of Business Organization, Whether a Government Owned Venture, Corporation, Sole Proprietor, Partnership or Limited Liability Company, etc.:-

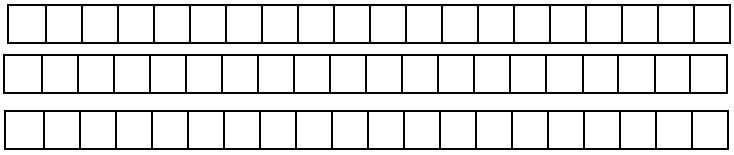
i.

ii.

iii.

iv.

04. Whether Manufacturer, Sole Importer, Sole Distributor or Stockiest, etc.



05. Nature of Business:

06. Business Registration Number and Registered Business. :-
(A copy of the certificate of Business registration should be attached)

07. Are you registered for VAT
(A copy of the certificate of ICTAD registration should be attached)

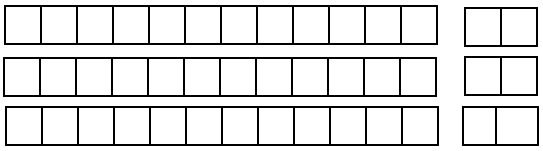
08. VAT Registration No:-
i. If "Yes" (Certified VAT certificate should be attached)
ii. If "No" (a letter from the Inland Revenue Department stating "VAT Registration is not required or exempts" should be attached)

09. Name of Bankers :-

10. Credit Facilities - Value up to Rs. Period
(Credit facilities at least for 30 days should be given)

11. Money order/receipt issued by the shroff bearing No. ……..
is attached (Delete Inapplicable)

12. Name and item numbers applied for:-



Signature of Supplier
(Rubber Stamps)