



ZESCO LIMITED

SUPPLIER REGISTRATION / AMENDMENT FORM

Supplier Name

Payment Method

Currency

Payment Terms

Currency Code

ZMk

TPN Number

Vat Reg. NO:

Bank Account

Bank A/C NO:

Physical Address

Street Number

Street

City\Town

State/Province

Box Number

Postal Code

Telephone

Fax

Web Site

Country

Contact Person

Telephone

Cell

Fax

E-Mail



ZESCO LIMITED

Supplier Type

Local
External
One Time
Employee

Supplier Class

Manufacturer
Agent
Distributor
Trader
Clearing Agent

Category

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Reason For Supplier Amendment

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Annual Turn Over:

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Certificate Of Incorporation Number:

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Proof Of at least 3 Customer Reference in Past 3 Years:

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Proof Of Audited Accounts:

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Proof Of Catalogue or Supply List:

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Proof Of Payment of Non Refundable Fee:

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Director[s]:

Name(s):

- 1.
- 2.
- 3.

Contact Details:

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ZESCO LIMITED

1. 2. 3.

Proposed By (User Unit):	Verified By: (Catalogue. Officer)
Name.....	
Name.....	
Signature:.....	Signature.....
Checked By (Head of User Unit)	Approved By: (Head of Dept)
Name	
Name.....	
Signature.....	
Signature.....	

Note: All the above information to be completed before submitting the form to the Procurement Unit.