

Supplier Registration Form

Supplier Details		
Name:	Contact:	
Address:	Telephone:	
	Fax:	
Parent Company Details:		
Subsidiaries/Associates/Overseas Representatives:		
Nature of Business: Please mention Yes in the appropriate section		
Manufacturer	Authorized Agent:	Trader:
Consulting Company:	Other(Please Specify):	

1. Organization Profile

Provide describe about your organization profile in short sentences.

2. Category or Services offered

Please provide the kind of services offered in short sentences.

- 1.
- 2.
- 3.
- 4.
- 5.

3. Financial Details

- 3.1) Turnover in the Last 3 years:
- 3.2) Financial Statement:
- 3.3) Income Tax Registration No:
- 3.4) Service Tax Registration No:
- 3.5) Sales Tax Registration No:
- 3.6) Bank Details:
- 3.7) Please attach the clearance certificates and balance sheet.

4. List the Good/Services offered

Table 4.1

S.No	Goods/Services	National/International Quality Standards to which the items conforms

Add additional rows if required.

5. Orders Executed

- 5.1) No. of Orders executed in last 2 years:
- 5.2) Single largest order value executed in last 2 years:

Table 5.1

S.No	Company Name	Order Value	Time of Execution	Type of Goods/Services	References

Please add additional rows if required

6. Certifications

6.1) Please provide with the details of any quality certifications you had.

6.2) If you don't have any certifications , please address the following

6.2.1) How are your processes controlled to assure the final product quality?

6.2.2) Do you maintain Quality verification Records? At what stages of processing? Please furnish the details

6.2.3) Attach a list of approved suppliers & sub-contractors for major raw materials & components.

6.2.4) Attach a list of your manufacturing activities sub-contracted by you, how the quality ensured.

6.2.5) Attach a list of your Customers & the names of Inspection Agencies visiting your works.

Note: Section 6.2 is Mandatory for Manufacturer, not required for dealer.

7. Testimonials

7.1) Please provide the references of your testimonials

8. Certification

I, the undersigned, warrant that the information provided in this form is correct, and in the event of changes details will be provided as soon as possible:

Name	Functional Title
Signature	Date

Important Notes

1. To be completed by Supplier seeking registration as an approved supplier.
2. The questionnaire must be completed in full and be signed.
3. A company profile may accompany the registration form but will not be accepted as substitute for the application form – all fields on application form **MUST** be completed by applicant.
4. Applicants will be contacted via email & phone and must therefore submit an operating mail & contact number; failure to comply will result in excluding the supplier from the data base.
5. It should be noted that the Besten reserves the right to accept or reject any application.
6. Suppliers must comply with all the registration-criteria for registration to be finalized - failure to do so may result in the application being declined.