



REGISTRATION OF SUPPLIERS (2016/2017)
APPLICATION FORM

RECEIPT No. :

SERIAL No. :

Zambia Institute of Mass Communication Education Trust
Plot 3529 Government Road, P.O Box 50386RW
LUSAKA, ZAMBIA

APPLICATION FOR REGISTRATION OF SUPPLIERS 2016/2017

1. Company Name:

.....

2. Postal Address:

.....

3. Physical Address:

.....

4. Telephone numbers:

.....

5. E-mail address:

6. Website:

7. Particulars of Goods/Services

a)

b)

c)

d)

e)

f)

g)

8. Company Registration no:

9. Year of Registration:

10. State two reputable companies you have done business in the last one year?

i

ii

11. Tax Clearance Certificate no:

12. VAT/TPIN no:

13. Do you agree to share information on the source of products you supply?

YES/NO

Reasons:

.....

14. Contact Official:

Designation:

Telephone no:

15. We declare that the information we have given above is authentic and should you find it to the contrary, will take appropriate action.

Name:

Signature:

Designation:

Date:

***Please attach the following**

i Company Profile

ii Copies of certificate of incorporation and articles of associations(if limited company) with list of Directors and Shareholders

iii Copy of VAT/Tax Clearance certificate

iv Proof of exiting previous Clients

v Copy of curriculum vitae, academic and professional certificates (For individuals)

vii Proof of payment of a non-refundable fee of K350.00

Tick to show what has been attached. If the attachment(s) is or are not available state below the reasons for unavailability of the attachments:

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FOR OFFICAL USE:

ACCEPTED/REJECTED

Name:

Signature:

Date: