



Powercom (Pty) Ltd Erf 8161, Building no.4, Julius K Nyerere street, Southern Industrial Area | P.O.Box 40799 Ausspannplatz, Windhoek, Namibia

MASTER DATA FORM

Company Name: _____

Email Address: _____

Telephone number(s): _____

Fax number(s) : _____

Description of principle business: _____



REGISTRATION AS A PROSPECTIVE SUPPLIER WITH POWERCOM (PTY) LTD

Dear Supplier

PowerCom values its relationships with suppliers and envisages that the Prospective Supplier Databases allows efficient administration of prospective suppliers as well as meeting the requirements of PowerCom policies and the Public Procurement Act, 2015 (Act No. 15 of 2015) and Public Procurement Regulations.

PowerCom gives preference to those suppliers and service providers who have registered themselves on the Prospective Supplier Database when issuing requests for quotations.

Registration Process

Please complete the official registration form in full, sign as required and initial all pages. Attach all supporting documents as requested.

PowerCom reserves the right to reject any incomplete application form accompanied by insufficient information.

SUPPLIER DATABASE REGISTRATION FORM TO BE COMPLETED BY ALL BUSINESSES SEEKING TO CONDUCT BUSINESS WITH PowerCom

The following important notes should be read carefully before the completion of this form

1. It should be noted that PowerCom (PTY) Ltd reserves the right to accept or reject any application without being obliged to give any reasons in this respect. Suppliers that have been registered onto the Suppliers Database may have the opportunity to bid or quote on PowerCom's acquisition requirements. Registration onto the Supplier Database does not guarantee business opportunities.
2. This form must be completed in full, initialed and signed by the duly authorized signatory.
3. Full signatures are required when alterations are made in this document.
4. If the information required is not applicable to your business, clearly insert the symbol "N/A" in the appropriate space.
5. If the space provided is left blank, your registration form will be regarded as incomplete and your business will not be registered on the database.
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.

7. No faxed or e-mailed applications will be accepted. Only original and signed copies of application will be accepted. Suppliers may not alter the Application Form in any way.
8. A company profile shall accompany the registration form but will not be accepted as substitute for this application form – all fields on application form must be completed by applicant.
9. Applicants will be contacted via e-mail and must therefore submit an operating email address – failure to comply will result in excluding the supplier from the vendor database.
10. Suppliers that have registered onto the Supplier Database should ensure that they furnish PowerCom with any change to the status of the information initially provided, as and when the information changes.
11. Suppliers are to ensure PowerCom is always in possession of a valid certified copy of Inland of Revenue Good Standing Certificate, and Valid Company Registration Documents. Suppliers whose tax clearance certificates have expired will be blocked from PowerCom’s database until such time as valid documents are submitted. Suppliers who fail to attach all the required supporting documents will be deemed to be non-compliant. It is therefore recommended for the suppliers to check the attachments.
12. Suppliers are to attach an original certified copy of the relevant industry accreditation certificate, where applicable.
13. Suppliers that have registered onto the Supplier Database will be continuously monitored for their performance on work awarded to them by PowerCom. This continuous monitoring process will form the basis to evaluate supplier performance which will have an impact on future opportunities with PowerCom.
14. The front page of the envelope must be clearly marked “Supplier Database Registration” and must be made for attention: Procurement Management Unit. The envelope must be hand delivered or posted via registered mail to one of the following addresses:
15. Please mark the back of the envelope with Sender (Business Name), Contact Person and Telephone Number.

I have read and understood the importance of the above notes

16. Business Profile (Please complete or tick where applicable)

Registered Company Name: _____

Trading Name (if different): _____

Company/ CC Registration Number: _____

Business Registration/ID Number:

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(please attach certified copy of proof of registration)

Income Tax Number:

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Vat Number:

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SSC Number:

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SME Certificate:

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Company Insurance Number, if applicable

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Original Tax Good Standing Certificate Attached

YES	NO
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Expiry Date:

Y	Y	Y	Y	/	M	M	/	D	D
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Original SSC Good Standing Certificate

YES	NO
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Expiry Date:

Y	Y	Y	Y	/	M	M	/	D	D
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Company Profile Attached

YES	NO
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Company Registration documents attached

YES	NO
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Number of Years in Business

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Type of Business (Please tick the relevant box)

Public Company Ltd	
Private Company (Pty) Ltd	
Close Corporation CC	
Sole Proprietorship	
Partnership	
Other	

Small Medium Enterprise Status (Please tick the relevant box)

Very Small	
Small	
Medium	
Large	

Area of Business (Please tick the relevant box)

Manufacturing	
Supplier of Services	
Other (please specify)	
Supplier of Products	
Import	

SHAREHOLDING/ OWNERSHIP INFORMATION

List all persons who are shareholders/owners or have an ownership interest in the business. Shareholding must add up to 100%

Name & Surname	ID Number	Citizenship	% of Ownership	Female or Male

People with disability (Please tick the relevant box)

YES	
NO	

Does the person also fulfill an Executive Management function in the business? If yes, please complete below table

Name & Surname	ID Number	Citizenship	% of Ownership	Female or Male

Postal Address:

Physical Address:

Contact Persons

Finance Department

Name: _____

Designation: _____

Tel: _____

Fax: _____

Email: _____

Sales Department

Name: _____

Designation: _____

Tel: _____

Fax: _____

Email: _____

REFERENCES OF PREVIOUS CLIENTS

Company/Institution Name	Contact Person	Value of Contract	Description of Work

BANKING DETAILS

Bank Account Name: _____

Name of Bank: _____

Branch Code & Name: _____

Account Number: _____

Type of account: _____

(Certified as correct by Banking Institution)

Name and Surname: _____

Signature: _____

Designation: _____

Tel No: _____

Email address: _____

Note: all information is compulsory, except where the vendor is not registered for VAT purposes and also not registered with the Ministry of Trade & Industry.

Documentation to be attached to this application form

Item No	Documentation required	Attached	If not included provide reason
1	Original certified copy of company registration forms		
2	Original valid tax good standing certificate		
3	Original certified copies of shareholder certificates documents		
4	Original certified copies of shareholders / directors / owners / members identity documents.		
5	Original certified copy of accreditation certificate for relevant industry		
6	Valid SME Registration Certificate to support SME status claim		

7	Certified copy of Affirmative Action Compliance or Exemption Certificate		
8	Company Profile		
9	Bank detail verification letter (with a bank stamp on it) – obtain it from your bank		
10	Certified copy of NPPC		

NB: SUPPLIERS ARE REQUESTED TO ATTACH THEIR TERMS AND CONDITIONS TO THIS FORM

DECLARATION OF INTEREST

All service providers are required to declare any interest that they or their employees may have in PowerCom, or that any PowerCom employee may have in the service provider. To that effect the following must be duly stated by the authorized signatory:

Are you or any person associated with your proposal employees of PowerCom? Yes/No If so, state particulars

Have you, or any person associated with your proposal any relationship (family, friend, other) with any person employed at PowerCom who may be involved with the evaluation and adjudication of this tender/proposal? Yes/No If so, state particulars

CERTIFICATION OF CORRECTNESS OF INFORMATION SUPPLIED IN THIS DOCUMENT.

I/We the undersigned warrants that the information contained in this form is correct, and I/We are fully authorized to furnish the information contained herein on behalf of the business.

Please note that only authorized signatories may approve this document and that the all pages should be initialed by each signatory

Name and Surname: _____

Signature (Duly authorized to sign): _____

Designation: _____

On behalf of (Name of Business) _____

Date: _____ **Signed at:** _____

OFFICIAL USE:

Recommendation by Procurement department for vetting of vendor:

Signature: Procurement Assistant

Date

Signature: Procurement Officer

Date

Signature: Senior Manager Finance

Date

For official use only:

Version 1

PowerCom Supplier No:

Comments:

Audited by:

Date: