## 2024 PRE-QUALIFICATION OF SUPPLIERS LIST



## 2024/001

Category	
Registered Name of Organization	
Full Details and Contacts of	
Shareholders/Owners	
onal cholders, o whers	
Full Details and Contacts of	
Directors/Partners Where	
Applicable	
Physical and Postal Address	
Contact Person	
Phone Number(s)	
Email Address	
Company Registration No.	
Tax Payer Registration No.	
Tax Tayer Negistration NO.	

Registration Certificates with Appropriate Professional Bodies	
Business References	1.   2.   3.
Bank Details (Name of Bank and Account Number)	

## For Official Use Only

**Evaluation Committee Comments:** 

Name	Signature	Date
Name	Signature	Date