



Strengthening Africa in World Trade

PREQUALIFICATION FORM FOR THE SUPPLY OF GOODS AND SERVICES FOR THE YEARS 2017-2018

This form must be filled in **ENGLISH** using **CAPITAL LETTERS**

TENDER NOTICE NUMBER SEATINI01/2015-2016

CATEGORY:

CATEGORY REF. NUMBER:

1. GENERAL INFORMATION

1. a) Business/Company name:

.....

(Must attach company profile indicating organizational structure, key personnel and total number of employees)

2. b) Location of business premises:

Head Office:

Country/Town.....

Physical Address

Branches (If Any)

1.

.....

.....

2.

.....

.....

c) Postal Address:

Town:

Tel No:

.....
.....

Email address:

.....

Website:

.....

d) Nature of Main Business: (Attach a copy of valid trading license).

Manufacturer:..... Authorized Agent:

Trader: Consulting Firm:

Others, (Please Specify):

.....

Number of Years in Business:

e) Registration Details:

Certificate of Registration /Incorporation

No.:.....

Trade License No.: V.A.T Registration No.:

(Must attach copies of all the above relevant documents)

f) Bankers details:

Account Name:

.....

Account Number:

Bank Name: Branch Name:

g) Annual Turnover in (Ugx):

.....

h) Provide at least three referees from your current clients and their detailed contacts (attach a recommendation letter from each of the listed people)

Organization	Contact Person	Position	Phone Number

2. OWNERSHIP

2 (a) - Sole Proprietors

Your Name in full:

.....

Age: Nationality.....

Part 2 (b) - Partnership

Give their details in the table below:

Name	Nationality	Passport Number or an Equivalent	Telephone Number

Part 2 (c) - Registered Company

a). Private or public (state whichever is applicable):.....

Give the details of all the Directors as below (attach their passport photographs)

Name	Nationality	Passport Number or an Equivalent	Telephone Number

3 (a) - Declaration of conflict of interest

In the event that the key company officials have any relationship with any SEATINI UGANDA's employees please declare the interest herewith:

No	Name of the Official in your company	Name of the official in SEATINI Uganda	Relationship

DECLARATION

I/We have completed this form (s) accurately at the time of reply and it is agreed that all responses can be substantiated, if requested to do so. Any inaccuracy in the information filled herein will be used as grounds for removal from or termination of the qualification process.

I/We confirm that I/We are not insolvent, in receivership, bankrupt or being wound up, our business activities have not been suspended and we are not the subjects of legal proceedings for any of the foregoing.

Signed and Sealed:

For and behalf of:

Position in Company:

Date.