

**PREQUALIFICATION FORM FOR THE SUPPLY OF GOODS AND SERVICES FOR THE YEARS 2018 AND 2019**

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

TENDER NOTICE NUMBER FOOD RIGHTS ALLIANCE 04/2018 and 2019

CATEGORY: ………………………………………………………………..…………………

PROCUREMENT REF. NUMBER………………………………………………………………

**GENERAL INFORMATION**

**1. INDIVIDUAL PROPRIETORS**

 **(a) Individuals/Sole Proprietors/Consultants**

Individual/Sole Proprietor/Consultant Details

Full Name: ………………………………………………………………….

P.0 Box: ………………………………..........................................................

Physical Address: …………………………………………………………….

Telephone: …………………………………………………………………….

Email: …………………………………………………………………………

Official Identification (Passport Number/National ID Number):……………….

**b) Registration Details (If applicable):**

Certificate of Registration /Incorporation

 No.:……………………………………….…………………..

Trade License No.: …………………………………

*(Must attach copies of all the above relevant documents)*

**c) Bankers details**:

Account Name:

…………………………………………………………………..…………………

Account Number: ………………………………………………..………….………………

Bank Name: ……………………………………………..

**d) Nature of Main Business/services/professional area** *(*Attach a copy of valid trading license, if applicable).

Nature of main business/services/professionalism: ..……………..……………………………

Others, (Please Specify): ……………………………………………………..………………....

Number of Years in specified professionalism: ……………………….

**e)** 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 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Declaration of conflict of interest**

In the event that the applicant has any relationship with any FOOD RIGHTS ALLIANCE or ASSOCIATES please declare in the interest

|  |  |  |
| --- | --- | --- |
| No | Name of the official in FRA | Relationship |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**DECLARATION**

I 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 confirm that am not insolvent, in receivership, bankrupt or being wound up, my business activities have not been suspended and are not the subject of legal proceedings for any of the foregoing.

Name: ……………………………………………………………………………

Signed and Sealed: ………………………………………………………………..

 Date: ……………………………………