



.....causing a smile and heal the land

LINDII PEACE FOUNDATION

LPF VENDOR REGISTRATION FORM

LPFVendor REG NO:	
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Disclaimer Note: This Registration Form enables the Lindii Peace foundation (LPF) to gather about your company. LPF can only issue Purchase Orders and pay invoices from vendors that are registered with such information. The information is kept confidential, only authorized staff will have access to this form when filled out, except for information mentioned in the below paragraph, all other data will be solely for internal use and not share with external parties. When registering as a vendor with LPF, and in line with LPF donor regulations, the details in "Vendor Name", "Addresses", "Company contact details", "Banking Information" and/or "Additional Financial Identification" will be used to conduct due diligence checks on financial information and to confirm that the vendor is not listed in Sanction Lists. The data will be kept for 3 years

COMPANY CATEGORY (kindly tick inside the box below) :

LIMITED LIABILITY COMPANY (LTD)		BUSINESS NAME		OTHERS:	
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LIST OF SERVICES PROVIDED:

COMPANY INFORMATION/DETAILS

COMPANY NAME:					
CONTACT ADDRESS:					
ADDRESS 1:					
ADDRESS 2:					
CITY/STATE:					
PHONE NUMBER:		FAX NO:			
EMAIL ADDRESS:		COMPANY REGISTRATION NO:			
TAX IDENTIFICATION NO:		VAT REGISTRATION NO:			
AVERAGE ANNUAL TURNOVER:		CURRENCY:		AMOUNT:	

BANK ACCOUNT INFORMATION/DETAILS

BANK NAME:		ACCOUNT NAME:			
BANK BRANCH:		ACCOUNT NO:			
SORT CODE NO:		ACCOUNT TYPE:			

VENDOR TERMS AND CONDITIONS

TERMS OF PAYMENT:					
TERMS OF DELIVERY:					

CONTACT PERSON INFORMATION/DETAILS

NAME:		PHONE NO:		DESIGNATION:	
COMPANY REPRESENTATIVE SIGNATURE AND STAMP:				DATE:	

Approved Company Signatory Details and Endorsement

Certification: I, the undersigned, warrant that the information provided in this form is correct, and in the event of changes, details will be provided as soon as possible. I further confirm that my company will adhere to LPF Supplier Code of Conduct and that a signed copy will be submitted with this application.

NAME:					
ROLE (TITLE/POSITION):					
SIGNATURE with Date AND STAMP:				Phone No:	
				Email:	