

SUPPLIER INFORMATION FORM (SIF) (CONFIDENTIAL)

Please provide the following information and attach extra documentation as required. Every question of this form must be completed. Insert "N/A" where questions are not applicable. All information held within this form is CONFIDENTIAL and will be handled accordingly.

1. Legal Name of the Company:

2. Local Address :

Telephone :

Fax No. :

E-mail :

Web Address :

3. Registered Address :

Telephone :

Fax No. :

E-mail :

Web Address :

4. Type or Structure of Supplier's Firm (please tick the appropriate one):

Proprietorship Partnership Limited Company Corporation Others

Please provide the following information if yours' is a Limited Company/ Corporation:

a. Place of Incorporation:

b. Date of Incorporation:

c. Estimated Total Amount of Revenue:

5. List of the Supplier's Principal Bank(s):

Name of the Bank :

Account No. :

Address :

Telephone No. :

Fax No. :

E-mail :

Web Address :

Supplier shall attach additional sheet if required

6. Supplier will Provide Copies of the Following Documents: (please mark items provided)

	Name of the Document	Yes	No	N/A
a.	Memorandum and Articles of Association (certified copy) (applicable for Limited Company Only)			
b.	Certificate of Incorporation (applicable for Limited Company Only)			
c.	Valid Trade License			
d.	Value Added Tax (VAT) Registration Certificate (applicable for Local Company/ Foreign Company if they participate through their			

	local office in Bangladesh)			
e.	Tax Identification Number (TIN) Certificate (applicable for Local Company/ Foreign Company if they participate through their local office in Bangladesh)			
f.	Bank Solvency Certificate not older than 30 days from the date of submission (if not a Limited Company)			
g.	Most current Annual Report (audited, if available) (applicable for Limited Company)			
h.	ABC Supervisory License (electrical works only)			
i.	Other document(s) related to your business (Licenses, Certifications, etc.)			

Supplier Information Forms that are not completed in their entirety, with all relative and requested attachments or which are not certified by an acknowledged official of the entity may not be accepted by Robi Axiata Limited.

The undersigned is authorized to Certify on behalf of the entity that all stated information in the above form and attachments are true and correct and no important and relevant information has been suppressed. The undersigned acknowledges that the Company at any time may verify the validity the above information.

Signature & Seal :

Name of the Signatory :

Designation of the Signatory :

Name of Company :

Date :