



Finance & Administration Procurement Department Vendor Registration Form (V1)

Ref #

Date: / /

The Supplier / Vendor Code will be given by NAC. Don't write anything in this box.

Supplier / Vendor Code

Supplier / Vendor Name

License No

Validation of License

Renewal of License

Supplier Contact Nam/

Name: نام	Designation: وظیفه	Authorization Level: سطح صلاحیت

Phone

Phone No نمبر تلفن	Fax فاکس	Remarks تفصیلات

Email

Address

Type of Business/ نوع تجارت

Stamp Sample/ نمونه تاپه شرکت

Area of Work
(Provinces)/
ساحات کاری (ولایات)

President Signature

Sub Office Address/
آدرس دفتر ولایتی

Vice President Signature

Sub Office
Contacts /
نمبر دفتر ولایتی

Remarks

تفصیلات

Please fill in and return this form to NAC Kabul Office, Nawai Watt Street No. 03, House No. 294, Shahr-e-Naw, Kabul

For office use only:

Registered By:

Name:

Designation:

Date:

Signature:

Checked By:

Name:

Designation:

Date:

Signature: