



**VENDOR REGISTRATION FORM**

Company Name	Complete Company Address
	_____
	_____
	_____

Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_ Email Add: \_\_\_\_\_

Type of Organization :     Single Proprietorship     Partnership     Corporation

Nature of Business: \_\_\_\_\_

Products Manufactured or Services Provided: \_\_\_\_\_

Company Data:	
Date Organized: _____	Place Organized: _____
SEC Registration: _____	Registration Certificate No. _____
TIN: _____	

Contact Person:	
Name: _____	Telephone No. _____
Position: _____	Email Address: _____

I certify that all information above are true and correct to the best of my knowledge. The above information is given for the purpose of Peregrine to verify and add us to their Official Vendor List.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed

**For Procurement Use:**

Received By: \_\_\_\_\_  
Signature Over Printed Name/Date

Attachment:     Company Profile  
                   Brochures

Classification:     Supplier  
                          Contractor

**Remarks / Recommendations:**