



LEAD

Tel.: (263-242) 369905-11

**No. 5 Premium Close
Mt. Pleasant Business Park
Mt Pleasant
P.O.Box A1132
Avondale
Harare**

FINANCE AND ADMINISTRATION DEPARTMENT SUPPLIER'S REGISTRATION FORM

This form will be used for pre-qualification purposes only. Kindly complete and return to:
The Chairperson-Procurement Committee
LEAD
No. 5 Premium Close,
Mt. Pleasant Business Park,
Mt. Pleasant,
Harare

COMPANY DETAILS

Company Name	
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Contact Details	Postal Address	Physical Address		
Telephone		Fax		
Email		Cell		

Contact Person	Name		Position	
	Telephone		Fax	
	Mobile		Email	

	Date of Registration		Company Reg. no.
	VAT No.		

Company Details	Name of Shareholder		% holding	Are any of your shareholders or directors related to or associated with any employees or directors of LEAD? If so please give details.
	1			
	2			
	3			
	4			
	5			

Director Information		Name	Nationality/Residence	Chief Executive:	
	1				
	2			Nationality/Residence:	
	3			Company Secretary:	
	4				
5			Nationality/ Residence:		

General information	Have you conducted any business with LEAD in past? If so give details.		
	<hr/>		
	Is your invoicing Computerized? <input type="checkbox"/>	Are your statements Computerized? <input type="checkbox"/>	When are your statements Sent out <input type="text"/>
	Who are your main bankers?		
	Any other bankers		
	Bank Details : Bank Name:		
Account Number:			
Branch Name Branch Code.....			

REGISTRATION FOR SUPPLY OF ITEMS				
Name of items bidding for	Are you a manufacturer of these items?	Are you an agent for these items?	Are you a Franchise holder?	Delivery lead time?
1.				
2.				
3.				

Payment terms	Please indicate your credit terms	Please specify how discount , if any, will be applied
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Trade references: Please give names of four organizations to which you supply goods and services. Also indicate	1 Company name, postal and physical address		2 Company name, postal and physical address	
	Contact Name		Contact Name	
	Position		Position	

for how long you have been dealing with named companies on a regular basis.	Telephone		Period of		Telephone		Period of	
	Fax		Association		Fax		Association	
	Mobile				Mobile			
	Email				Email			
	3 Company name, postal and physical address				4 Company name, postal and physical Address			
	Contact Name				Contact Name			
	Position				Position			
	Telephone		Period of		Telephone		Period of	
	Fax		Association		Fax		Association	
	Mobile				Mobile			
Email				Email				

Performance Details	Turnover past three years	1	Net asset value at year end for past three years	1
		2		2
		3		3
	Please provide any other inf. In support of your application	<hr/> <hr/> <hr/> <hr/> <hr/>		

Certification	We confirm that the above details are true and correct. We understand that any incorrect information will automatically disqualify or cancel existing contracts.			
	Prepared By		Company Stamp	
	Position			
	Signature		Date	

PLEASE NOTE:

1. May please attach the following;
 - a) Company profile
 - b) Certificate of incorporation
 - c) Current Tax Clearance
 - d) CR14
 - e) Sample of quotation and invoice
1. Completion of the supplier registration Form is a Pre requisition for Proposal to contracting business with **LEAD**, but does not necessarily lead to the issue of an order to your company from **LEAD**.
2. The legal agreement between supplier and **LEAD** shall be defined in the official purchase order or a contract between the supplier and **LEAD**.
3. LEAD reserves the right to accept and reject registration of a potential supplier into its list of registered potential suppliers.
4. Eligibility criteria for inclusion in the list of approved supplier and potential suppliers shall consider:
 - a) Legal capacity to enter into contract

- b) Professional and technical competence
 - c) Compliance to the government of Zimbabwe suppliers' registration requirements.
5. LEAD reserves the right to remove a potential supplier from its list of registered potential suppliers in the following circumstances:
- a) If inducement are offered by potential supplier to **LEAD** staff to contract business.
 - b) If delivery of goods and services purchased under the purchase order are inspected by **LEAD** and proved unsatisfactory.
 - c) Any engagement of unethical procurement practices as stated in The Procurement Act 22:14

I..... have read and understood the **NOTE**.

Signature.....designation.....date.....