**Annex-3:** Service Provider Detail

|  |  |
| --- | --- |
| Information to be entered by supplier/Service Provider in the below columns | |
| Company Name: |  |
| Company Authorized Representative Name: |  |
| Tazkira number: |  |
| Please state full contact details of the contractor. |  |
| Company Registration No: |  |
| Company Specialization: |  |
| Official Mobile No: |  |
| Email Address: |  |
| Business Address: |  |
| Does your company have a Code of Conduct? |  |

Signature and Stamp: ……………………………………..

Date: ……………………………………………….