



SUPPLIER REGISTRATION APPLICATION FORM

IMPORTANT NOTES

Please read carefully

- To be completed by **all** vendors seeking registration as an approved supplier
- The questionnaire must be completed in full and be signed
- A company profile must accompany the registration form but will not be accepted as a substitute for the application form
- ECGBB reserves the right to accept or reject any application **without being obliged to give any reasons** in this respect
- Supplier will not be notified whether application was accepted or not
- Supplier must comply with all the registration-criteria for registration to be finalized – failure to do so may result in the application being declined
- Completed supplier's database forms must be handed delivered/posted/couriered to ECGBB offices:
ECGBB Building
Quenera Park
Quenera Drive
Beacon Bay, 5205

PO Box 15355
Beacon Bay, 5202
- **No services will be rendered without an official order**
- All invoices should reflect an order number as ECGBB reference
- All deliveries should take place between 08h00 and 16h00
- By completing and submitting this form you hereby grant permission to Eastern Cape Gambling and Betting Board to capture this data as part of its vendor database profile. Completion of this form does not in any way guarantee any contracts whatsoever.

If you are a supplier at a Governmental Department please complete the following:

DEPT NAME		SUPPLIER #	
DEPT NAME		SUPPLIER #	
DEPT NAME		SUPPLIER #	
DEPT NAME		SUPPLIER #	
DEPT NAME		SUPPLIER #	
DEPT NAME		SUPPLIER #	

WHAT DOCUMENTS DO YOU NEED TO ATTACH TO THESE APPLICATION FORMS?

1. Tax Clearance Certificate
2. Copy of ID's of Directors – certified copy
3. Company Profile
4. BEE Rating Certificate, if applicable
5. Letter from Bank Acc with Bank Acc Details or a crossed cheque
6. CK1 and/or CK2 or any other company registration documents – certified copy

COMPANY DETAILS:												
Registered name of the organisation:												
Trading name:												
Company registration number:												
Income tax registration number:												
VAT registration number:												
UIF registration number:												

CONTACT DETAILS:												
Contact person	Title:		Surname:									
	First names:											
Position:												
Telephone	Code:											
Facsimile	Code:											
Cellular:												
Email:												
Website:												
Postal address:												
												Code:
Physical address::												
												Code:
BUSINESS OVERVIEW:												
Type of company (mark with an X)	Sole trader:			Partnership:								
	Close corporation:			Ltd:								
	Pty Ltd:			Other:								
	If Other (please specify):											
Business activities / services: (mark with an X)	Catering, accommodation and other trade											
	Marketing, advertising and communication											
	Postal/courier/delivery											
	Films and photographs											
	Garden services											
	Cleaning services											
	Event management											

	Printing	
	Office equipment, furniture	
	Office stationery	
	Training	
	Finance and business service	
	Information Technology	
	Research	
	Recruitment	
	Manufacturing	
Year of establishment:		
Turnover per annum (mark with an X)	Less than R5 million	
	Between R5 million and R35 million	
	More than R35 million	
Number of full-time employees	0 – 5	
	6 – 10	
	11 - 50	
	51 - 100	
	101 +	

DECLARATION:

I/we the undersigned, who warrants that he/she is duly authorised to do so, on behalf of the business, acknowledge that the information furnished is true and correct. Any misrepresentation of facts may lead to disqualifications. Should such misrepresentation be uncovered after the commencement of contracted work, ECGBB reserves the right to terminate the contract and recover all payments made to the business.

Full name:

Signature:

Date: