



CLARK ELECTRIC DISTRIBUTION CORPORATION

**PURCHASING DEPARTMENT
CEDC-PUR-VIS**

VENDOR INFORMATION SHEET (VIS)

(Please fill up the fields below accordingly)

Name of Company

LEASED OWNED Area: _____ M²

Address

Bldg No. _____
Street Name _____
Postal Code _____
City _____
Region _____
Country _____

Contact Numbers/Address

Telephone Nos. _____ Contact Person: _____
Fax No. _____
email Address _____ Website: _____

Location of Plant/Warehouse

LEASED OWNED Area: _____ M²

Business Organization

Corporation Partnership Sole Proprietorship

Business License No.: _____ Place/Date Issued: _____
Expiry Date: _____

No. of Personnel Regular Contractual/Casual _____
Nature of Business/Trade _____

<input type="checkbox"/> MANUFACTURER	<input type="checkbox"/> AUTHORIZED DEALER	<input type="checkbox"/> INFORMATION SERVICES
<input type="checkbox"/> WHOLESALER	<input type="checkbox"/> RETAILER	<input type="checkbox"/> COMPUTER HARDWARE
<input type="checkbox"/> TRADER	<input type="checkbox"/> IMPORTER	<input type="checkbox"/> SERVICE BUREAU
<input type="checkbox"/> SITE DEVELOPER / CONSTRUCTION	<input type="checkbox"/> CONSULTANCY	<input type="checkbox"/> OTHERS _____

Number of years in Business: _____

Complete Products & Services

Payment Details

Payment Method Cash Check Bank Transfer Others _____
Currency Loc.Currency USD EUR Others _____
Terms of Payment 30 days 15 days 7 days
Advance Payment Yes No _____ % of the Total PO/Contract

Bank Details:

Bank Name _____

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Bldg and Street	_____
City	_____
Country	_____
Postal Code	_____
Country	_____
Bank Account Name	_____
Bank Account No.	_____
Swift Code	_____
Iban Number	_____

VENDOR INFORMATION SHEET (VIS)

Key Personnel & Contacts (Authorized to sign and accept PO/Contracts & other commercial documents)

Name	Title / Position	Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Companies with whom you have been dealing for the past two years with approximate value in US Dollars:

Company Name	Business Value	Contact Person/Tel. No.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever provided products and/or services to Clark Electric Distribution Corporation?

Yes No

If yes, list the department and name of the personnel to whom you provided such goods and/or services.

Name of Person	Position	Items Purchased
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you have any relative who worked with us at one time or another, or are presently employed with CEDC?

If yes, kindly state name and relationship.

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Trade Reference

Company	Contact Person	Contact Number
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Banking Reference		
Bank	Contact Person	Contact Number

FOR CEDC USE ONLY

Industry 001 002

Where 001 - Goods (e.g. supplies, materials, tools)
002 - Services (e.g. professional services, consultancy, maintenance)

Vendor Type Global Local

VENDOR INFORMATION SHEET (VIS)

REQUIREMENTS CHECK LIST

Please submit the following documents together with the Information Sheet:

No.	Document	For CEDC use only	
		Submitted	Not Applicable
1	Company Profile (including the names of owners, key officers, technical personnel)	<input type="checkbox"/>	<input type="checkbox"/>
2	Company's Articles of Incorporation, Partnership or Corporation, whichever is applicable, including amendments thereto, if any.	<input type="checkbox"/>	<input type="checkbox"/>
3	Certificate of Registration from host country's Security & Exchange Commission or similar government agency/department/ministry	<input type="checkbox"/>	<input type="checkbox"/>
4	Valid Government Permits/Licenses (e.g. PCAB License)	<input type="checkbox"/>	<input type="checkbox"/>
5	Audited Financial Statements for the last 3 years*	<input type="checkbox"/>	<input type="checkbox"/>
6	Certificates from the Principals (e.g. Manufacturer's Authorization, Certificate of Exclusive Distributorship, Any certificate for the purpose, indicating name, complete address and contact details)	<input type="checkbox"/>	<input type="checkbox"/>
7	Catalogues/Brochures	<input type="checkbox"/>	<input type="checkbox"/>
8	List of Plants/Warehouse/Service Facilities	<input type="checkbox"/>	<input type="checkbox"/>
9	List of Offices/Distribution Centers/Service Centers	<input type="checkbox"/>	<input type="checkbox"/>
10	Quality and Safety Standard Document / ISO 9001	<input type="checkbox"/>	<input type="checkbox"/>
11	List of all contracts entered into for the last 3 years (indicate whether completed or ongoing) *	<input type="checkbox"/>	<input type="checkbox"/>

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12	Cetification that Non-performance of contract did not occur within the last 3 years prior to application for evaluation based on all information on fully settled disputes or litigation	<input type="checkbox"/>	<input type="checkbox"/>
13	For Construction Projects: List of machines & equipment (include brand, capacity and indication if the equipment are owned or leased by the Contractor)	<input type="checkbox"/>	<input type="checkbox"/>

* For Competitive Biddings, number of years may increase depending on the estimated contract amount.
 ** Indicate if an item is not applicable. Failure to provide any of the documents mentioned above . will result in automatic "failed" rating.

I hereby certify that the information above are true and correct. I am also authorizing CEDC to validate all claims with concerned authorities.

Received by:

Signature

Printed Name

Position / Title

Date

Signature

Printed Name

Position / Title

Date