



## VENDOR REGISTRATION FORM

**GENERAL SERVICES AND PROCUREMENT DEPARTMENT  
 INSTITUTIONAL PROCUREMENTS AND LOGISTICS DIVISION  
 ANGLE DES TROIS RUES, AVENUE DU GHANA,  
 RUE PIERRE DE COUBERTIN, RUE HEDI NOUIRA  
 BP. 323, 1002 TUNIS BELVEDERE  
 TUNISIA  
 TEL: (216) 71.102.829  
 FAX: (216) 71.254.911  
 EMAIL: vendor-registration@afdb.org**

<b>VENDOR REGISTRATION No:</b>
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**INSTRUCTIONS:**

1. Complete all sections and return with applicable support documentation to the above address. All the sections of the form and all support documentation shall be submitted in English or French. If the documentation is in language other than English or French, it should be accompanied by a certified translation.
2. Incomplete submissions will not be processed.

Section 1: Company Details and General Information		
1. Name of Company:		
2. Street Address (physical location of the registered headquarters):		
3. City:	4. State/Postal Code:	5. Country:
6. P.O Box:	7. Telephone Number:	8. Fax Number:
9. Company Email Address:	10. Company WWW Address:	
11. Contact Name/Title/Address (if different):	12. Telephone Number	
	13. Contact Email Address:	
14. Type of Business (Mark one only):		
Corporation: <input type="checkbox"/> Partnership: <input type="checkbox"/> Sole Proprietorship: <input type="checkbox"/> Government Agency: <input type="checkbox"/>		
Other (Specify): _____		

15. Year Established:	16. State/Province/Country where registered:	17. Business registration/license number:	18. Number of full-time employees:
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**Section 2: Financial Information**

1. Gross Annual Turnover for the last 3 years (please state currency)

Year 1: \_\_\_\_\_ Year 2: \_\_\_\_\_ Year 3: \_\_\_\_\_

3. Bank Name:	4. Bank Account No.:
5. Address of Bank (City/State/Region/Postal Code):	6. Country:
7. Swift Code or ABA Bank or National Clearing Number:	8. Branch <input type="checkbox"/> Main Office: <input type="checkbox"/>

9. Intermediary Bank (Alternate payee), if required:

10. Bank Name:	11. Bank Account Number:
12. Address of Bank (City/State/Region/Postal Code):	13. Country:

14. Swift Code or ABA Bank Number:

**Section 3: Technical Capability and Information on Goods/Services Offered:**

1. Has your company ever filed or petitioned for bankruptcy or reorganisation? Yes  No

(If yes, please attach a detailed explanation, filing date and current status)

2. Has your company ever been terminated for contract non-performance? Yes  No

(If yes, please attach a detailed explanation)

3. Has your company ever been debarred from Government contracts, ADB, or other International Multilateral/Financial Institution Procurement or project contracts?

Yes

No

(if yes, please attach a detailed explanation)

4. Has your company changed name(s) within the last 5 years?

Yes

No

(If yes, please list former name(s))

#### Section 4: Goods/Services Classification

1. Indicate your company's primary line of business:

- Manufacturing     Distributor     Retailer     Leasing     Wholesaler     Maintenance  
 Service     Consulting     Works

Other (please specify) \_\_\_\_\_

2. Provide a description of your company's primary products/services, in order of competence:

3. Company literature attached:

- Catalogue     Brochure     Other (specify) \_\_\_\_\_

I, the undersigned, hereby attest that the information provided herein is complete and correct. The information provided herein including attachments shall become representations under any resulting Contract.

Name (please print):	Signature	Date
Functional Title (please print):		

**Have you attached:**

- Annual Reports or audited financial reports for last 3 years/tax filings for last year
- Copy of your company's environmental policy, if applicable
- Explanation of labour disputes, if any
- Company literature (catalogues, brochures, etc)

**Failure to submit the requested support documentation/information (where applicable) may invalidate your application**

**Send completed application to:**

**African Development Bank  
Institutional Procurements and Logistics division  
ANGLE DES TROIS RUES, AVENUE DU GHANA, RUE PIERRE DE  
COUBERTIN, RUE HEDI NOUIRA  
BP. 323, 1002 TUNIS BELVEDERE  
TUNISIA  
TEL: (216) 71.102.829  
FAX: (216) 71.254.911  
EMAIL: vendor-registration@afdb.org  
Attention: VENDOR REGISTRATION**

**ANNEX 1**  
**GUIDELINE FOR VENDOR REGISTRATION AND ELIGIBILITY**  
**THE AFRICAN DEVELOPMENT BANK (ADB)**

**I. Who may apply for Vendor registration at the ADB?**

You may apply as a supplier of goods, services, or works if you are either 'A' or 'B' or 'C' as defined below and meet the eligibility criteria detailed in Section III of this document.

Definition:

- A. Natural Persons: A natural person is eligible if he or she is a national of a member of the Bank. Where a person has more than one nationality, such person shall be eligible if the nationality indicated in his or her registration form is that of a member of the Bank. In this definition, a member of the Bank is an eligible member country of the ADB.
- B. Corporations: A corporation is eligible if it satisfies the following criteria:
- I. It is incorporated in a country that is a member of the bank;
  - II. It is a national of a country that is a member of the Bank as determined by the law of its place of incorporation;
  - III. It has its principal place of business in a country that is a member of the Bank.
- C. Joint Ventures and Associations: An unincorporated joint venture, partnership or association shall be eligible if at least 60% of its individual or corporate members satisfy the eligibility requirement for individuals or corporations.

**II. How do businesses and independent contractors become eligible to register as an ADB Vendor?**

To register as an ADB Vendor, a business or an independent contractor must complete a Bank Vendor Registration Form, and provide the required support documentation referred to on the form. All the sections of the form and all support documentation shall be submitted in English or French. If the documentation is in language other than English or French, it should be accompanied by a certified translation. The Business must meet the criteria detailed in points 1-9 below.

**III. Eligibility criteria to register as an ADB Vendor**

1. The business enterprise must currently be incorporated, or registered as a company (corporation, limited, partnership) and be able to demonstrate that it has been and is offering goods/services under the business name. Independent contractors must be able to demonstrate that they have been engaged in their business activity for not less than one year.
2. The Vendor should have operated with a positive operating income for the respective periods noted on the registration form and must provide Annual Reports and/or audited financial statements or certified tax filings for that period which will be subject to financial review.