KHYBER PAKHTUNKHWA OIL & GAS COMPANY LIMITED (KPOGCL)

3rd Floor Ali Tower Opp. Custom House University Road, Peshawar, Pakistan
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E-mail: info@kpogcl.com.pk Web: www.kpogcl.com.pk

Form No._____/2022-2023

VENDOR REGISTRATION FORM

I / We seek to register with KPOGCL as a supplier of:

GOODS ☐   WORKS & SERVICES ☐

Please complete in full – Type or print in ink

	SECTION 1: FIRM DETAILS AND GENERAL INFORMATION	
1	Name of Firm	
2	Address	
3	Telephone Number	
4	Fax Numbers	
5	Email	
6	Website	
7	Firm Registration Certificate (Attach Copy)	Yes ☐ Number:_____, No ☐
8	NTN Certificate (Attach Copy)	Yes ☐ Number:_____, No ☐
9	GST Certificate (Attach Copy)	Yes ☐ Number:_____, No ☐
10	KPST Certificate (Attach Copy)	Yes ☐ Number:_____, No ☐
11	Date Firm was established. (Min 3 Years Required)	

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12	Gross Annual Sales for Last 3 years	1. Year_____ Sales_____(PKR) 2. Year_____ Sales_____(PKR) 3. Year_____ Sales_____(PKR)
13	Previous experience	1. _____ 2._____ 3.
14	Firm Legal Structure	Sole Proprietor ☐ Partnership ☐ Limited Concern ☐
15	Type of Business	Retailer ☐ Wholesaler ☐ Manufacturer ☐ Franchise / authorize agent ☐ Works/ Construction ☐ Other (please specify) ☐ _____
16	Details of Goods &Services offered by your Firm	1._____ 5._____ 2._____ 6._____ 3._____ 7._____ 4._____ 8._____

SECTION 2 : DETAILS OF FIRM REPRESENTATIVE (Direct Contact)	
1	Name	
2	Designation	
3	Address	
4	Land Line Number	
5	Mobile Number	
6	Email Address	

7	CNIC (Attach Copy)	
8	Other details if any	

SECTION 3 : DETAILS OF FIRM REPRESENTATIVE (Alternative)		
1	Name	
2	Designation	
3	Address	
4	Land Line Number	
5	Mobile Number	
6	Email Address	
7	CNIC (Attach Copy)	
8	Other details if any	

SECTION 4: BANKING INFORMATION		
1	Bank Name	
2	Branch Address	
3	Beneficiary Name	
4	Account Currency	

5	Branch Code	
6	Account Number	

As per KPOGCL policy, above banking details will be kept highly secret

SECTION 5: CERTIFICATION
I, the undersigned, warrant that the information provided in this form is correct and, in the event of changes, details will be provided as soon as possible: Name: _____   Designation: _____   Signature: _____   Date: _____