

**UNIVERSITY OF VISUAL AND PERFORMING ARTS**

COLOMBO 7

**REGISTRATION OF SUPPLIERS – 2024**

**SPECIMEN APPLICATION FORM**

01. Name of Applicant:.....
02. Name of Company:.....
03. Name and number of supply/services for which registration is applied for:  
.....
04. Address:.....
05. Telephone:.....(Mandatory)
06. Fax:.....
07. Email address:.....(Mandatory)
08. Business registration number:.....
09. Please indicate the nature of business (sole, partnership, limited company or other)  
.....
10. Whether a manufacturer, wholesale importer, wholesale distributor, wholesale trader  
or other type of trader:.....
11. Name of banker:.....
12. Value of Credit limit – Rs..... Time (months):.....
13. Names of institutions for which supplies/services are provided now.....  
.....
14. Are you a registered tax payer? .....
15. If you pay taxes, your Inland Revenue Department registration number:.....
16. (a) Receipt number and amount mentioned in receipt issued by the University.....  
(b) Number, value and name of bank issuing bank order/ Bank Deposit  
(Please attached original of the Receipt/ Deposit slip).....
15. Vat Registration Number:.....

Date:

Signature & Name of Applicant.