Trade Name :	Control Number (To be inputted by PRD)					
☐ New Supplier	☐ Previously Accredited Supplier					
MUST TO PRESENT ACCREDITATION REQU (Please submit the following requirements. Arrange in chro		. •	n a long folde	r)		
(Flease submit the following requirements: Arrange in Circ	uriologicai ori	der and rasterrii	Registratio	n i		
APPLICABLE TO ALL			/ License Number	Date of Registration	Expiration Date	
1. Duly Accomplished Non-Trade Supplier Accre	editation App	olication				
2. Signed Non-Trade Supplier Guidelines						
3. Company Profile				••••••		
4. Certified True Copy of 2010 Income Tax Retu						
5. BIR Certificate of Registration (BIR Form No.6. Certified True Copy of DTI Certificate of Busin		Registration				
7. Mayor's Permit/ Municipal License (2011)	icos ivallic	riegistration				
8. Sample copy of Sales Invoice, Delivery Recei	pt, and Offic	cial Receipt				
9.a. For existing suppliers: List of goods and serv						
to PSC/CDI and other additional goods and services (with current prices)	s to offer to	PSC/CDI				
9.b. For new suppliers: List of goods and services planning to offer to						
PSC/CDI (with current prices)						
APPLICABLE FOR CORPORATIONS						
10. SEC Certificate of Incorporation						
☐ 11. Certified True Copy of Articles of Incorporation						
☐ 12. Certified True Copy of By Laws						
ADDITIONAL REQUIREMENTS (FOR CONTR	RACTORS)				
13. Philippine Contractors Accreditations Board						
For PSC's input						
SUBMISSION OF APPLICATION						
Submitted by : (Name and signature of	# of Must F		uirements:	Date Submitted:		
Company Representative)			:++! .			
Received by:		# of Must Subr	milled.			
REVIEW AND APPROVAL OF APPLICATION						
☐ Approved	☐ Disapproved					
	Reason:					
Eduardo P. Bataclan	Date	Released:				
Manager, PRD SYSTEM UPDATE						
*For New Suppliers						
Date Forwarded to	Ruby Ramin:					
Finance Division:	Date	Added to the				
*For Existing Suppliers	<u> </u>					
Activated by:	Date Activated:					
ACCREDITATION CERTIFICATE						
Received by : (Name and signature of	Date	Received:				
Company Representative)	Control Number:					