

 Northern Foods Corp.	SUPPLIER ACCREDITATION FORM	Doc Code	FM-PUR-02.02
		Rev. No.	01
		Effectivity Date	03 Nov 2010
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Company Name :	
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NO.	Submit the following REQUIREMENTS (photocopies only) and please fill up the information required on the spaces provide for.				REMARKS (For NFC)
1	SEC Registration No.		Registration Date		
	DTI Registration No.		Registration Date		
			Valid Until		
2	Phil-GEPS Certificate of Registration No.		Registration Date		
			Valid Until		
3	BIR Certificate No.		Registration Date		
4	Business Permit No.		Valid Until		
5	Latest Audited Financial Statement for the last 2 years duly Received / Stamped by the BIR		Year 1		
			Year 2		
6	Authorization of Representative to transact business with NFC		Submitted (Y/N)?		
7	Company Profile		Submitted (Y/N)?		
8	Organizational Chart		Submitted (Y/N)?		
9	Sketch/Vicinity map of Main Office		Submitted (Y/N)?		
10	Others such as Certification of Distributorship, Importation, Resellership, etc		Submitted (Y/N)?		

By signing below, I confirm that the information given by me is all true and correct:

Prepared / Submitted by:

Signature over printed name

Date

FOR NFC USE ONLY			
Received by:	Evaluated by:	GRANTED	DENIED
_____ Signature Over Printed Name	_____ Signature Over Printed Name	_____ Signature Over Printed Name	
Date :	Date :	Date :	