



**SYKES AND PARTNERS LIMITED -  
GHANA**

**VENDOR REGISTRATION FORM**

Document #: SP-MS-F-09-15-0

Rev. 0

**SECTION 1: COMPANY DETAILS AND GENERAL INFORMATION**

COMPANY NAME	
COMPANY REGISTRATION #	
COUNTRY OF COMPANY REGISTRATION OR DOMICILIATION	
COMPANY TAX NO/ TIN	
VAT NO	
POSTAL ADDRESS	
TELEPHONE NUMBER(S)	
E-MAIL ADDRESS	
WEBSITE ADDRESS	
COMPANY PHYSICAL ADDRESS	
NAME AND TITLE OF COMPANY REPRESENTATIVE	
DIRECT E-MAIL ADDRESS OF COMPANY REPRESENTATIVE	
TELEPHONE NUMBER(S) OF COMPANY REPRESENTATIVE DIRECT NUMBER MOBILE NUMBER	
DATE COMPANY WAS ESTABLISHED	
GROSS ANNUAL SALES FOR LAST THREE YEARS	

**SECTION 2: PRINCIPAL BUSINESS/ DESCRIPTION**

**LEGAL STRUCTURE (CHECK ONE)**

CORPORATION	<input type="checkbox"/>	PARTNERSHIP	<input type="checkbox"/>	SOLE PROPRIETORSHIP	<input type="checkbox"/>
JOINT VENTURE	<input type="checkbox"/>	FRANCHISE	<input type="checkbox"/>	LIMITED LIABILITY	<input type="checkbox"/>

**NATURE/TYPE OF BUSINESS**

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**DETAILS OF PRODUCTS AND SERVICES YOUR COMPANY SUPPLIES**

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**NUMBER OF EMPLOYEES:**

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**SECTION 3: BANKING INFORMATION**

BANK NAME	
BANK ADDRESS	
BENEFICIARY NAME	
INTERNATIONAL BANK ACCOUNT NUMBER (IBAN)	
SWIFT/BANK IDENTIFIER CODE (BIC)	
ACCOUNT CURRENCY	
BANK ACCOUNT NUMBER	

**SECTION 4 : DIRECTORS INFORMATION**

**DIRECTOR 1**

FULL NAME	
GENDER	
OCCUPATION	
CELL PHONE/TELEPHONE	
EMAIL	
OWNERSHIP/SHARES	

**DIRECTOR 2**

FULL NAME	
GENDER	
OCCUPATION	
CELL PHONE/TELEPHONE	
EMAIL	
OWNERSHIP/SHARES	

**DIRECTOR 3**

FULL NAME	
GENDER	
OCCUPATION	
CELL PHONE/TELEPHONE	
EMAIL	
OWNERSHIP/SHARES	

*When the Directors are more than three, kindly add supplementary sheets.*





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**SECTION 5 : Company Classification**

PRIME CONTRACTOR	
SUBCONTRACTOR	
LABOUR- ONLY SUBCONTRACTOR	
MANUFACTURER	
SUPPLIER	
PROFESSIONAL SERVICE PROVIDER	
OTHER (SPECIFY)	

**SECTION 6: HSEQ**

DOES YOUR COMPANY HAVE HSEQ POLICY(IES)	YES	NO	IF YES PROVIDE COPY(IES) OF HSEQ POLICIES
DOES YOUR COMPANY HAVE HSEQ MANAGEMENT SYSTEM	YES	NO	IF YES PROVIDE COPY(IES) OF HSEQ POLICIES

**SECTION 7: BUSINESS ETHICS**

DOES YOUR COMPANY HAVE A POLICY ON ANTICORRUPTION AND BRIBERY?	YES	NO	IF YES PROVIDE COPY(IES)
DOES YOUR COMPANY HAVE A POLICY ON BUSINESS CODE OF CONDUCT?	YES	NO	IF YES PROVIDE COPY(IES)
DOES YOUR COMPANY HAVE A POLICY ON "STOP WORK "?	YES	NO	IF YES PROVIDE COPY(IES)
DOES YOUR COMPANY HAVE A POLICY ON ALCOHOL AND DRUG USAGE?	YES	NO	IF YES PROVIDE COPY(IES)
DOES YOUR COMPANY HAVE A POLICY ON HUMAN RIGHTS?	YES	NO	IF YES PROVIDE COPY(IES)

**SECTION 8: SUPPORTING DOCUMENTATION**

**IN ORDER TO BE CONSIDERED FOR REGISTRATION BY SYKES AND PARTNERS FOR BUSINESS, PLEASE PROVIDE THE FOLLOWING INFORMATION IN ENGLISH:**

1. Certificate of Incorporation, Certificate of Commencement and a Vat Registration Certificate.
2. Audited financial Information for the past 2 years.
3. Letter from bank confirming bank account details and status.
4. Company Profile.

**SECTION 9: CERTIFICATION**

I, the undersigned, hereby accept Sykes and Partners Ltd.'s Health, Safety, Environmental and Quality management standards, procedures, policies, practices, rules , general terms and conditions, a copy of which has been provided to me via the link <https://sykesandpartners.com/downloads/> , and 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 \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_





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**SECTION 10: COMPANY DETAILS AND GENERAL INFORMATION**

NOTE:

1. The bank account to which any payment will be made must be the company's bank account
2. Sykes and Partners Ltd. reserves the right to request additional documents from your company to substantiate the registration request, including letters of reference from Clients to whom your company has provided goods and services over the past years, copy of required certifications such as ISO certificates or equivalent.

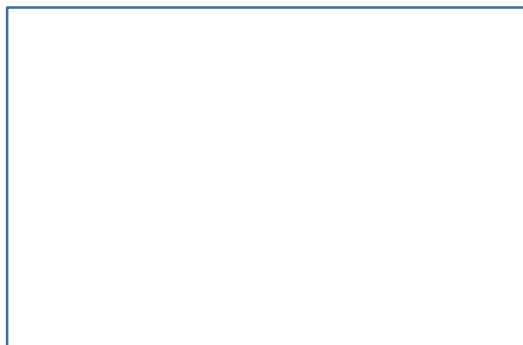
**SECTION 11 : DECLARATION**

I/We the undersigned, who warrants that he/she is duly authorized to do so on behalf of the company, certifies that the information and certificates furnished are true and correct, and qualifies/qualify for Sykes and Partners LTD to conduct reference.

Signed at .....on.....day of.....20.....

.....  
 (Signature of Owner /Authorized representative)                      (Position)

Company Stamp



**SECTION 12: WITNESS**

Name: ..... Title: .....

Signature: ..... Date: .....

