

# GOVERNMENT OF BRUNEI DARUSSALAM

## VENDOR FORM

(Please tick one only)

Request Type : ☐ Creation of new vendor ☐ Update of an existing vendor

*Compulsory documents for new vendor:*

*ROC/ROB 16/17 for Company/Business*

*Police letter of clearance for Persatuan/Club*

*EPU letter for Koperasi/Cooperation*

*Copy of IC for individuals (Birth Certificate if you are under 12 or Passport if you are a foreigner)*

Vendor Name 1 \_\_\_\_\_ Date \_\_\_\_\_

Vendor Name 2 \_\_\_\_\_

Vendor ID (ROC/ ROB #) \_\_\_\_\_ (if applicable)

### (New) Vendor Location/Address

Location Description \_\_\_\_\_

Vendor Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Country \_\_\_\_\_ State \_\_\_\_\_

Postal Code \_\_\_\_\_

### (New) Contact Person / Contact Details

Contact Person \_\_\_\_\_

Designation \_\_\_\_\_

Email \_\_\_\_\_

Contact Number \_\_\_\_\_

### (New) Mailing Address (if different from Vendor Address)

Vendor Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Country \_\_\_\_\_ State \_\_\_\_\_

Postal Code \_\_\_\_\_

### Special Instructions (Please provide details)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **Please fill in this section for EFT Request or Change of EFT Bank Account**

*Note : 1. Please provide a company letter stating bank account as an attachment to this request and*

*2. Header of your latest bank statement that shows the bank account number*

Bank \_\_\_\_\_

Bank Branch \_\_\_\_\_

Bank Account Number \_\_\_\_\_

\_\_\_\_\_

I hereby certify that the provided information above is correct.

Company Stamp  
(Required for EFT Requests)

\_\_\_\_\_  
Name  
Title