**SUPPLIER PROFILE**

1. **Company Details**

|  |  |
| --- | --- |
| Name of the Supplier: |  |
| Address of Main Office: |  |
| City: |  |
| Country: |  |
| Phone Number(s): |  |
| Email Address(s): |  |
|  |
| Authority Registered with and Registration number  |  |
| Year Established: |  |
| Number of Staff: | Full-time:Part-time: |

1. **Representative Contact Details**

|  |  |
| --- | --- |
| Name: |  |
| Title/Position: |  |
| City: |  |
| Country: |  |
| Phone Number(s): |  |
| Email Address(s): |  |

1. **Social Media Details:**

|  |  |
| --- | --- |
| Website: |  |
| Facebook: |  |

1. **Key Staff (Managers and technical experts who will liaise with DKH Yemen)**

|  |  |  |
| --- | --- | --- |
| **FullName** | **Position** | **Contact Details** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |

1. **Financial Details:**
* Does the organization have a bank account in its own name: Yes / No
* In which Bank is the Bank Account? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Does the company accept cheques and/or bank transfers: Yes / No
* Is the company registered with the Tax department: Yes / No
1. **List recent contracts with international aid organizations, civil society organizations, UN agencies or governments or partnerships with organizations**

|  |  |  |  |
| --- | --- | --- | --- |
| **Serial** | **Organisation Name** | **Dates / Period of Contract** | **Type of Commodities/Services** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |

1. **Declarations:**

I hereby declare that the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert name of company) I represent:

* Is legally registered in Yemen (attached copy of company registration);
* Has never been in serious breach of any contract;
* **Does not employ any child labour**
* **Is not involved in any arms trafficking or terroist financing**
* Is not engaged in illegal activities; and
* That the information provided in this document is true and accurate, and in the event of changes, details will be provided to DKH Yemen.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Name:
Position:
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the organization has a stamp, please affix here: