



PROVINCIAL BIDS AND AWARDS COMMITTEE

Submit this form to BAC

The Proprietor/Manager

Dear Sir/Madam:

In line with our mandate to maintain an updated roster of bona-fide suppliers, please furnish us certified copies of the following documents:

1. DTI/SEC (Photocopy)
2. Business/Mayor's Permit for **CY Latest** (Photocopy)
3. BIR Tax Clearance (**Latest**) (Photocopy)
4. Photocopy of the **Certificate of Registration (COR)** duly authenticated by the **BIR**
5. Photocopy of OR for the payment of Accreditation/Registration fee (**P 500.00**)
6. Certificate of **PhilGEPS Registration** (www.PhilGEPS.gov.ph)
7. **Photocopy** of Statement of **Accounting/Billing Statement**

Sample: for Goods

- Charge Invoice
- Sales Invoice

for Catering Services

- * Billing Statement
- * Statement of Account

8. Photocopy of Official Receipt (OR) (Sample)
9. Fill-out Supplier Accreditation Information Form

Effective immediately, procurement from your establishment shall be suspended pending submission of the above requirements.

JIVELLYN B. CO, CE, MPA
(PGSO DEPARTMENT HEAD)

Trunk line #'s: **09992221967** and Press # **02320** for PGSO-BAC
Telephone No.: **(084) 655-9415** and Press # **02320** for PGSO-BAC
Email Address: **bacddn4@gmail.com**





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SUPPLIER ACCREDITATION INFORMATION

1. Registered Trade/Business Name: _____
2. Business Address: _____

3. Active Telephone Nos: _____
Active Cell phone Nos: _____
Active Fax Nos: _____
Active Email Address/ Website: _____
Taxpayer Identification Number: _____
4. Line of Business:
_____Manufacturer: _____Dealer:
_____Exclusive Distributor: _____Others:
5. Principal Products/ Services (Use Additional sheets if necessary):

6. Form of Ownership:
_____Single Proprietorship _____Corporation
_____Partnership
7. Name of Authorized Representative: _____
Official Title/Position: _____
Active Cell phone No. (If any): _____

I hereby certify that the above information is true and correct to the best of my knowledge.

Signature over Printed name of Proprietor/ Manager

