



Non-Resident Nepali Association (NRNA)

Vendor Request Form 2081-83

Vendor Business Name: _____

Business Type:

☐ Sole ☐ Partnership ☐ Nonprofit ☐ Small and Cottage Industry ☐ Local Government ☐ Independent contractor/Consultant ☐ Other _____

Established Date: _____ Registration No. _____

PAN/VAT: _____ Latest Renewal Date: _____

Objective of the Company (as per the official document):

Service and Product Category:

Name of Proprietor/Owner: _____ (Name) _____ (Designation) _____

Contact Details Address: _____

Contact Number: (Office) _____ Mobile: _____

Email: _____ Website: _____

In case of Partnership: No. of Partners: _____

Full names of the Partners: _____

Name of Representative (Focal person): _____

Position: _____ Contact No.: _____

Email: _____

No. of Employees: _____

Annual Turnover: (Expected): _____

Official Bank Account: _____

Account Number: _____

Account Name: _____

Name of Bank: _____

Is your company promoted and invested by any Non-Resident Nepali? ☐ Yes ☐ No

If yes, Name _____, Country _____

If existing vendor, How long have you been serving the NRNA? _____

How do you get associated with NRNA and came to know about the opportunity?

☐ Website ☐ Social Media ☐ referred by ☐ Official bid ☐ Other _____

Do you provide services to the organizations/ entities associated with NRNA members directly?

☐ No ☐ Yes Name of organizations _____

Do you know any of the member or staffs of NRNA personally?

☐ No ☐ Yes _____ (Name) _____ (Position) _____

Do you provide credit facility to your merchant?

☐ No ☐ Yes, credit period for how long _____

Please submit the attested copy of documents:

☐ Registration Certificate (Renewal if applies)

☐ PAN/VAT Certificate

☐ Tax clearance certificate (latest)

☐ Company profile

☐ Experience Certificates

I/We hereby certify that the information contained herein is true and accurate. I understand that any false information may disqualify me/us from any business opportunities offered by the NRNA.

Name:

Designation:

Date: