

**SUPPLIER FORM, REGISTRATION OF SUPPLIERS, ICE ITALIAN TRADE AGENCY SINGAPORE**

**Details**

Company name:	
<b>Owner/ representative</b>	
Surname:	Type of business:
First name:	Social capital (S\$):
Business registration no.:	Date of registration:
GST registration no.:	CPF number:
<b>Turnover in the last three years</b>	
Year:	Total (S\$):
Year:	Total (\$S):
Year:	Total (\$S):

**Registered office**

Address:	Postcode:
Region:	County:
City:	Email:
Telephone:	Fax:
Website:	

**Postal address for delivery of documents**

Address:	Postcode:
Region:	County:
City:	Email:
Telephone:	Fax:
Mobile:	

**Other offices**

Address:	Postcode:
Region:	County:
City:	Email:
Telephone:	Fax:

**Agent/ representative**

Name:	Delivery address:
NRIC/Passport no:	
Contact no:	
Email:	

**Officers and names of shareholders holding a shareholding exceeding 10%**

Information available  YES  NO

Surname:	Name:
Position:	

**Parent companies and subsidiaries**

Information available  YES  NO

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**Bank details**

Bank:	
City:	County:
Branch number:	Account no.:
IBAN number:	

