

Supplier Form

Basic information :

Company Name:	
Legal representative	
Surname :	Type of Society :
Name :	Social Capital :
VAT Code :	E-mail :
Turnover of last three years	
Year :	Amount :
Year :	Amount :
Year :	Amount :

Address for delivery of tender documents :

Address :	Zip Code :
E-mail :	Telephone :
Fax :	Website :

Employee :

<p>No. of employees</p> <p style="text-align: right;">out of which</p>	<p>Managers :</p> <p>Officers :</p> <p>Technicians :</p> <p>Others :</p>
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Category :

<input type="checkbox"/>	A organization of exhibition and trade faires
<input type="checkbox"/>	B supply of office equipment
<input type="checkbox"/>	C furnitures and tools/machineries for office
<input type="checkbox"/>	D constructors services and renovation
<input type="checkbox"/>	E consultancy services and advisory

Other information :

Have you been worked with ICE or other Italian Public Administrations ?
If yes, on which projects?
Notes :

I declare to have read and accepted the "rules and regulations for selection of contractors and suppliers by Italian Trade Agency – Istanbul Office"

