

Application for Registration of Suppliers/Contractors – 2026

- 1. Item Category / Sub Category for which the registration is Sought (Please attach Separate Application for each Category/Sub Category):.....
- 2. Name of the Organization:.....
- 3. Address of the Organization:.....
- 4. Contact Number: Telephone:.....  
Fax:.....  
E mail:.....
- 5. Number and Date of Business Registration:.....  
(Attach a copy of Business Registration)
- 6. National Identity Card Number .....
- 7. Nature of the Business Organization (whether a sole proprietor, partnership, limited company or government owned entity, Corporation etc.):.....
- 8. Name of the Owner (When applicable):.....
- 9. Nature of the Business (Whether Manufacturer, Sole Agent/ Importer, Sole Distributor, Wholesale or Retailer):.....
- 10. Registration details with CIDA/Health Ministry/any other legal requirements (If applicable) for field of registration:.....
- 11. Number of Years of the Experience in the relevant field or Trade:.....
- 12. Name of Bankers and Account Numbers (Suppliers who do not have bank accounts will be rejected):.....
- 13. VAT Registration No:.....
- 14. Availability of 30days Credit Period (Yes/No):.....
- 15. Whether the delivery of items to the University is being undertaken (Yes/No):.....

- Although quotations will be usually called from registered Suppliers /Contractors the University reserves the right to call for quotations from other Suppliers/Contractors as well to obtain competitive offers.
- Suppliers who wish to apply for the registration of No. 2 - Repairs and Services of All Kind of Motor Vehicles under Category B – Supply of Services, are required to fill the relevant Annexure from 1 to 4. University Automobile Engineer will visit and inspect the vehicle repair Centers within 03 months of the registration.

I/We hereby agree with the conditions stipulated by the University of Sri Jayewardenepura and submit my/our application for the registration of Suppliers/Contractors – 2026.

Date:..... Signature & Seal:.....

For official use

Total amount paid		No. of Categories	
Business Registration Certificate		03 years' experience in similar capacity	
Form - Conflict of Interest		valid VAT clearance Certificate	

Recommendation of the Evaluation Committee –

Recommended/Not Recommended

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Chairman/Evaluation Committee