

# PRINCE MOHAMMAD BIN FAHD UNIVERSITY

## VENDOR REGISTRATION FORM

Name of Business Firm: \_\_\_\_\_

Company Address: \_\_\_\_\_

Telephone no/s.: \_\_\_\_\_ Fax no/s.: \_\_\_\_\_

\_\_\_\_\_

Manager / Sales Representative Name: \_\_\_\_\_

\_\_\_\_\_

Website: \_\_\_\_\_ Email/s address: \_\_\_\_\_

\_\_\_\_\_

Mode of Payments: \_\_\_\_\_ Credit Limit: \_\_\_\_\_ S.R. \_\_\_\_\_

\_\_\_\_\_

Bank Account details: ( for bank transfer use )

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Form filled by: Name / signature / company seal

\_\_\_\_\_

Date: \_\_\_\_\_

FOR THE USE OF PMU PURCHASING SECTION AND BUDGET AND ACCOUNTING DEPT. ONLY

Form Received Date: \_\_\_\_\_ System Updated by: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_