



GREATER NILE PETROLEUM OPERATING COMPANY LTD.

VENDOR LISTING DATASHEET

VENDOR DATABASE MANAGEMENT SYSTEM

Company Name:	
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1. This datasheet shall be completed in **capital letters or type-print**, endorsed and stamped.
2. Any information that does not fit the provided spaces shall be submitted in separate sheets as attachments.
3. The completed datasheet shall be submitted to the following address:

**VDMS (Vendor Database Management System) Unit
 CONTRACTS SECTION, ROOM 204
 CONTRACTS, PURCHASING AND LOGISTICS DEPARTMENT
 GREATER NILE PETROLEUM OPERATING COMPANY LIMITED
 KHARTOUM TOWER, GAMHOURIA STREET
 P.O. BOX 12527 KHARTOUM
 REPUBLIC OF SUDAN**

4. Please specify(√):

New Listing		Renewal	
		GNPOC Company Reference No.	
		Expiry Date	

4. GNPOC receipt stamp here: _____ Date: _____



GREATER NILE PETROLEUM OPERATING COMPANY LTD.

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RECEIPT CONFIRMATION

GNPOC Receipt Stamp:

Receiving Clerk:

Date:

REMINDER

For hand delivery, retain this stub for reference.

Company Name:

VENDOR DATABASE MANAGEMENT SYSTEM

CONTENTS:

- SECTION A COMPANY DETAILS**
- SECTION B GENERAL INFORMATION**
- SECTION C SCOPE OF LISTING**
- SECTION D HEALTH, SAFETY & ENVIRONMENT AND QUALITY ASSURANCE
(SERVICE VENDORS ONLY)**
- SECTION E PAST PROJECTS**
- SECTION F SIGNATURE SHEET**

GREATER NILE PETROLEUM OPERATING COMPANY LTD.

Company Name:

SECTION A - COMPANY DETAILS

VENDOR DATABASE MANAGEMENT SYSTEM

Company Name	
Registered Business Address	
Fax No.	
Telephone Number	
E:mail Address	
Contact Name(s)	
Correspondence Address (if different from above)	

GREATER NILE PETROLEUM OPERATING COMPANY LTD.

Company Name:

SECTION B – GENERAL INFORMATION

1. Specify your company profile:

Type	Tick (√)	Country of Incorporation	Date of Incorporation	Years Under Present Company Name
Corporation				
Joint-Venture				
Subsidiary				
Individual				
Others (describe)				

Provide certified true copies of Business License or Certificate of Incorporation.

2. Provide information on affiliated companies (provide attachment if space is insufficient):

Company & Contact Name	Tel. & Fax No.	Affiliation (√)			Location (City & Country)		
		Parent	Subsidiary	Partner	In Sudan	In Middle East	Others Locations
Do you have any affiliated company in Sudan? (Yes or No) →							
If no, do you plan to set-up office in Sudan? (Yes or No) →							
If you plan to, please provide detailed plan →					- Please provide as attachment -		

Provide Parental Guarantee from each holding/principal/parent company.

Company Name:

3. Specify Major Financial Parameters:

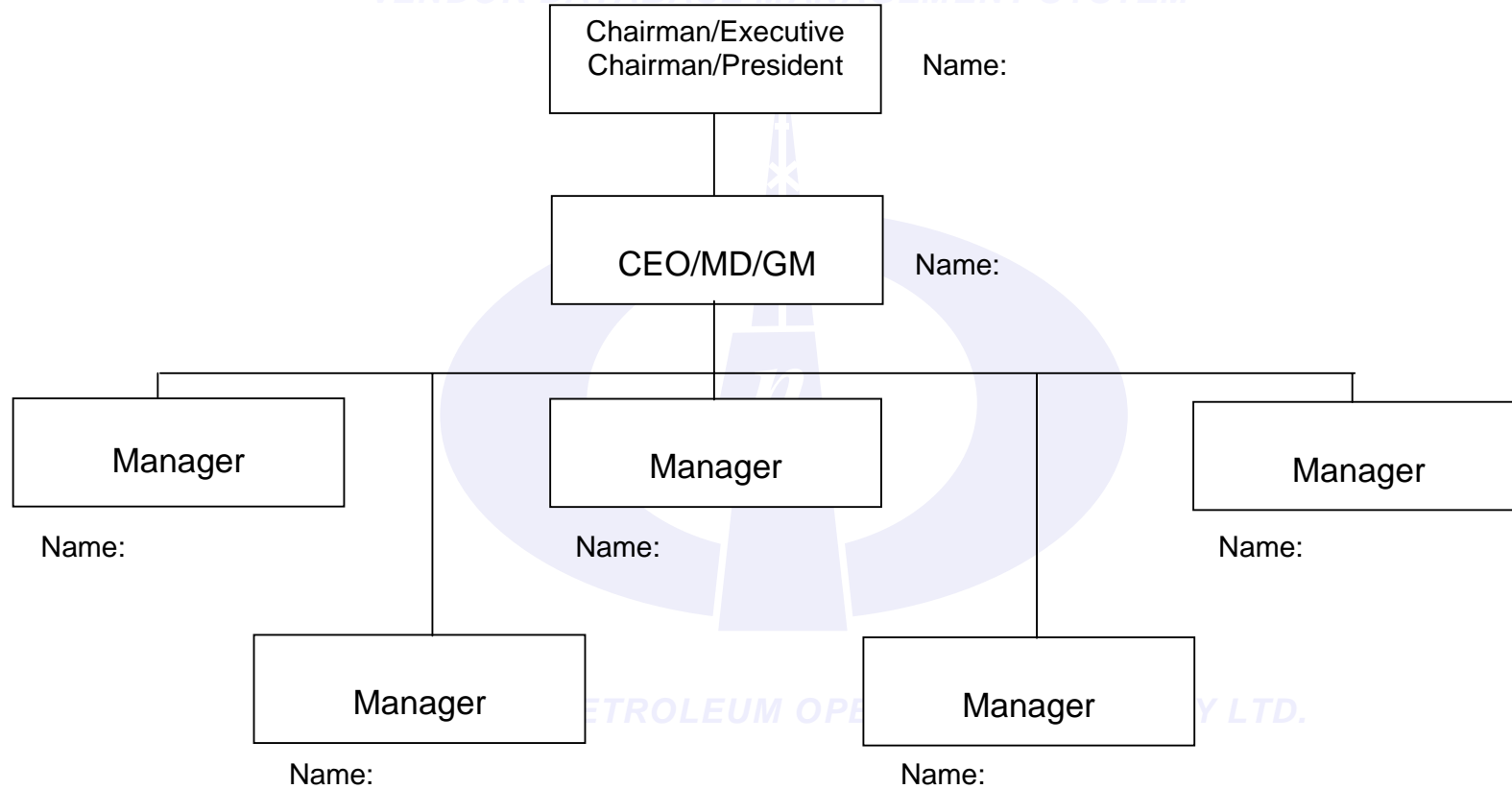
Authorized Capital (USD)			
Paid-up Capital (USD)			
	Most Recent (Year:)	Last 1 Year (Year:)	Last 2 Years (Year:)
Net Worth / Shareholder's Funds (USD) - Specify most recent and the previous 2 years.			
Turnover (USD) - Specify most recent and the previous 2 years.			
Gross Profits (USD) - Specify most recent and the previous 2 years.			

4. Specify Major Shareholders of the Company:

No.	Name	Position	Holdings Percentage (%)	Authorized Signatory (✓)
1				
2				
3				
4				
5				
6				
7				
8				

Company Name:

5. Organization Chart:



Notes:

The Organization Chart has to follow the above format as guideline. If your Organization Chart is more elaborate, please submit as an attachment. The resumes of key personnel have to be submitted as attachments.

Company Name:

1. Specify the MSSC categories in which the company specializes (refer to MSSC attachment):

No.	Secondary Level MSSC Category Description	Capital (√)	Goods (√)	Service (√)	Primary Level MSSC Code	Secondary Level MSSC Code
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

GREATER NILE PETROLEUM OPERATING COMPANY LTD.

Company Name:

SECTION D - HEALTH, SAFETY & ENVIRONMENT AND QUALITY ASSURANCE (SERVICE VENDORS ONLY)

1. Specify the following Health Safety & Environment documents:

No.		YES(√)	NO(√)
1	Does your company have a written H. S. E / loss prevention program?		
2	Does your company have an established, written H. S. E. Policy?		

2. Specify the following Insurance Coverage Plan:

No	Underwriting Company	Amount (USD)	Type of Policy(√)				
			Workers' Compensation	Employers Liability	Comprehensive General Liability	Automotive Liability	Professional Indemnity
1							
2							
3							
4							
5							

3. Specify the following Quality Assurance documents:

No.		Quality Standard
1	Is your company accredited to ISO 9001 or equivalent standards? Specify which standard.	
2	Does your company have a written Quality Assurance Manual in place? (YES/NO) →	

Provide copies of accreditation certificates.

Company Name:

SECTION E – PAST PROJECTS / SUPPLY

1. Specify the details of Works / Supplies executed over the past five (5) years.

VENDOR DATABASE MANAGEMENT SYSTEM

For GNPOC:

No.	Type of Work / Supply	Contract / PO No.	GNPOC Dept.	Duration / Delivery Date	Total Contract Cost (USD)	Completion Status (Y/N)
1						
2						
3						
4						

In Sudan:

No.	Company	Contact Name	Telephone No.	Type of Work / Supply	Total Contract Cost (USD)	Completion Status (Y/N)
1						
2						
3						
4						

Outside Sudan:

No.	Company	Contact Name	Telephone No.	Type of Work / Supply	Total Contract Cost (USD)	Completion Status (Y/N)
1						
2						
3						
4						

Company Name:

2. Specify past participation in GNPOC tendering exercises:

Have you ever participated in GNPOC tendering exercises in the past? (Y / N) 

If 'YES', please provide details below:

No.	Year	Project Name / Tender Description	Tender No.	Awarded (Y / N)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

GREATER NILE PETROLEUM OPERATING COMPANY LTD.

Company Name:

SECTION F – SIGNATURE SHEET

VENDOR DATABASE MANAGEMENT SYSTEM

I/We hereby certify that all the information and documents furnished in this datasheet are complete and genuine.

Signature:			
Name:			
Company Director (√)		General Manager (√)	
Company Stamp:			

GREATER NILE PETROLEUM OPERATING COMPANY LTD.