



EDO STATE GOVERNMENT OF NIGERIA



# Edo State Public Procurement Agency (EDPPA)

Accountability, Transparency, & Value for Money

**GOVERNOR'S OFFICE**

Plot 89, Dennis Osadebe Avenue, G.R.A,  
PMB 1080, Benin City, Edo State, Nigeria

## CONTRACTORS REGISTRATION FORM

### SECTION A: REGISTRATION OF COMPANY PARTICULARS

#### BASIC CONTACT INFORMATION

1. Full Registered Name of Business: \_\_\_\_\_

\_\_\_\_\_

2. Other Business Trade Name: \_\_\_\_\_

3. **Head Office Address**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Post Office Box: \_\_\_\_\_ Private Mail Bag: \_\_\_\_\_

4. **Business Telephone Number(s):**

Fixed /Land Line: Country Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mobile Phone Number(s): \_\_\_\_\_

5. Business Fax Number: Country Code: \_\_\_\_\_ Fax Number: \_\_\_\_\_

6. Business Email Address: \_\_\_\_\_

7. **EDPPA Registration Contact Information: (Optional – if different from contact information provided above)**

Email Address: \_\_\_\_\_

Fixed/Land Line: Country Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mobile Line Number(S): \_\_\_\_\_

Contact Name: \_\_\_\_\_

**LEGAL REGISTRATION INFORMATION**

8. Company Legal Structure: *(Tick appropriate box below)*  
 Limited     Private Limited     Partnership     Proprietorship     Government Agency
9. Date of Company Registration: \_\_\_\_\_ *dd/mm/yyyy*
10. Date Business Commenced: \_\_\_\_\_ *dd/mm/yyyy*
11. Company's Ownership Structure: *(Tick appropriate box below):*  
 Nigerian Owned     Foreign
12. CAC Business Registration Number: \_\_\_\_\_ *(Nigerian companies only)*
13. Tax Identification Number (TIN): \_\_\_\_\_ *(Nigerian companies only)*
14. Pension Registration Number (PenCom): \_\_\_\_\_  
*Nigerian companies only with 5+ employees)*
15. **Board of Directors:**  
 List the members of the board of directors of your company below. For Nigerian companies, this list should be identical to the **current Form CO7** filed with the Corporate Affairs Commission (CAC).

S/N	First Name	Last Name	Nationality	Country of Origin
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

**SECTION B: BUSINESS CATEGORIZATION INFORMATION**

**COMPANY LINES OF BUSINESS INFORMATION**

16. Main Categories or Lines of Business of Your Company *(Tick appropriate box below)*  
 Works                       Services                       Goods

17. **For Services Categories Only – Professional Body / Industry Regulator Membership:** Based on your category selection, you may be required to provide details of your certification and/or membership with the Professional Body or Industry Regulator for your professional service practice area.

Corporate / Individual Professional Registration and Membership Details:

Registered Name with Professional Body/Regulator *(if corporate)*: \_\_\_\_\_

Name of Main Registered Practitioner *(if individual)*: \_\_\_\_\_

Corporate / Individual Practitioner Membership Number: \_\_\_\_\_

18. **For Goods Categories Only – Manufacturer Agency or Foreign Distributor Representation:** Provide details of any Manufacturer Representative or Foreign Agency/ Distributorship Relationship

Manufacturer Representative or Foreign Agent/Distributor Representation Details:

Manufacturer Name / Foreign Principal Company: \_\_\_\_\_

Date of Commencement of Agency Relationship: \_\_\_\_\_ dd/mm/yyyy

Type of Representation *(Exclusive or Non-Exclusive)*: \_\_\_\_\_

**SECTION C: BUSINESS CLASSIFICATION INFORMATION**

**SECTION C1 - WORKS (CONSTRUCTION) CATEGORY COMPANIES ONLY**

**19. Standard Construction Equipment Template:**

Please provide details of equipment owned or leased by your company using the format below.

A specific template is provided for each Works category.

**Important Notes –please review before completing table:**

- *This information will be used in classification of contractors into applicable “grades” or “tiers” and may be subject to further verification.*
- *A contractor must be able to show evidence of registration of equipment declared in the name of the contractor only.*
- *A contractor must also be able to provide copy of proof of ownership, vehicle license, road worthiness and insurance for all declared equipment at time of verification. All equipment must be in serviceable condition.*
- *Providing false information may lead to serious sanctions and outright disqualification.*

**Standard Equipment Template – For Highways and Streets Category:**

<b>Standard Equipment Type</b>	<b>Total Number Owned or Leased</b>
Bulldozer	
Excavator	
Pay Loader	
Grader	
Rollers	
Trucks	
Survey Equipment (Theodolite)	
Concrete Mixers	
Crane	
Asphalt Plant	
Tar Boilers	
Water Pump	
Low Bed	
Air Compressor	
(Others) Specify	

20. **Management Personnel Template:**

Please provide details of company management personnel using the format below.

Required Information	Managing Director	Head of Finance/Accounts/ Administration	Head of Technical/ Engineering/ Operations	Head of Human Resources
<i>Does this Position/ Role Exist In Your Company? (Yes / No) (if yes, provide details below)</i>				
First Name				
Last Name				
Official Title				
Appointment Date <i>(dd/mm/yyyy)</i>				
Nationality				
Country of Origin				
Passport Number				
Date of Birth <i>(dd/mm/yyyy)</i>				
Highest Educational Qualification Achieved				
Professional Certifications				
Total Years of Experience				

21. **Construction Technical Personnel Template:**

Please provide details of company technical personnel using the format below.

**Important Notes –please review before completing table:**

- This information will be used in classification of contractors into applicable “grades” or “tiers” and may be subject to further verification including review of professional qualifications.
- Personnel may be permanent or temporary and must be indicated as such. All personnel should have proper certification for their job.
- Providing false information may lead to serious sanctions/outright disqualification.

**Construction Technical Personnel**

**Template:**

Standard Constructi on Technical Roles	Number of Staff in Your Company	Staff No#	Position Or Title In Your Company	First Name	Last Name	Employment Type <i>(Permanent or Temporary)</i>	Professional Certification
Construction Manager							
i							
ii							
Registered Engineers (Civil)							
i							
ii							
iii							
Registered Engineers (Electrical)							
i							
ii							
iii							
Registered Engineers (Mechanical)							
i							
ii							
iii							

Registered Quantity Surveyors							
i							
ii							
iii							
Technologist (Civil)							
i							
ii							
iii							
Technologist (Electrical)							
i							
ii							
iii							
Technologist (Mechanical)							
i							
ii							
iii							
Site Supervisors							
i							
ii							
iii							

## SECTION C2 – SERVICE (CONSULTANTS) CATEGORY COMPANIES ONLY

### 22. **Consultant Professional Staff Personnel Template:**

*Please provide details of the Consultant's Professional Staff expertise using the format below.*

A specific template is provided for each Consultant category.

#### **Important Notes –please review before completing table:**

- *This information will be used in classification of contractors into applicable "grades" or "tiers" and may be subject to further verification including review of professional qualifications.*
- *Consultant personnel may be permanent or temporary and must be indicated as such. All personnel should have proper academic qualifications and certifications for their job.*
- *Providing false information may lead to serious sanctions/ outright disqualification.*





### SECTION C3 – FINANCIAL CAPACITY INFORMATION

23. **Audited Total Sales Turnover of Your Company for the last three financial years:**  
(All Companies)

Financial Year	Amount (Naira)	Date of Audit Report	Name of Audit Firm

24. **Additional Financial Ratio Information for the last three financial years:**  
(All Companies)

Financial Year	Pre-Tax Profit as % of Sales	Quick Ratio	% Return on Total Assets

- 25 **Current Number of Employees:** \_\_\_\_\_ (All Companies)

### SECTION C4: JOBS COMPLETED INFORMATION

26. **Number of Relevant Jobs/Projects / Contracts Completed in the past three years:**

Please provide details of previous jobs completed for each category that your Company has selected using the format below.

**Important Notes –please review before completing table:**

- This information will be used in classification of contractors into applicable “grades” or “tiers” and may be subject to further verification including review of job completion certificates.
- Only jobs that are fully completed are valid. On-going jobs or partial completion are not applicable.
- Providing false information may lead to serious sanctions/ outright disqualification.

**Jobs Completed Template:**

S/N	Name of Client Organization (Private or Govt)	Client Reference Contact First Name	Client Reference Contact Last Name	Contact Email (if available)	Contact Phone Number (if available)	Title of Job	Relevant Category	Award Date (dd/mm/yyyy)	Completion Date (dd/mm/yyyy)	Award Value (Naira)
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										

## SECTION D: PAYMENT INFORMATION

### 27. Registration Payment Details:

S/No	Company Name	Registration Amount	Category	Bank Drafft No:	Bank name

## SECTION E: LEGAL DISCLOSURES AND SIGNATURES

### 28. Legal Terms and Conditions:

- The area of operation is entire Edo State of Nigeria
- The registration is not transferable
- The registration will not confer any special rights or privileges.
- The registration will be valid for a period of two (2) years and up to month/ year indicated in the Contractor Registration Certificate.
- The registration is valid for the Item of works/goods/services mentioned in the certificate.
- Application for renewal of Contractor Registration Certificate if desired should be submitted at least one month before the expiry date.
- This registration Certificate cancels all previous registration certificates granted earlier to the contractor by any Procuring Entity in the State.
- The registration is liable to revocation or cancellation if it is found at any time that the particulars furnished by the Contractor are false.
- The registering authority reserves the right to cancel or demote or suspend from business or black list without any notice and without assigning any reasons thereof.

### 29. Formal Binding Declaration by Executive Officer of Company:

*Declaration below must be signed by a senior executive officer of the company with the power to sign on behalf of the company e.g. Managing Director, Chief Finance Officer, Head of Legal etc*

I / We declare and confirm that:-

- i. The information submitted herein concerning the Applicant/Firm's financial capacity, personnel, plant and equipment, etc pertains solely to the Applicant/ Firm and that such information does not relate to or arise from any other Applicant / Firm categorized or to be categorized at the Edo State Public Procurement Agency (EDPPA) in which I / We have any interest and/or controlling interest by way of either direct or indirect ownership.
- ii. All information and attachments submitted in this application are true and correct.
- iii. I / We are aware that any false information provided herein will result in the rejection of this application and suspension of any categorizations granted.
- iv. I / We shall not make refund claims of expenditure incurred in processing this application.

Name in Full: \_\_\_\_\_

Designation / Position: \_\_\_\_\_

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

**30. Anti-Bribery Pledge by Executive Officer of Company:**

*The anti-bribery attestation below must be signed by a senior executive officer of the company with the power to sign on behalf of the company e.g. Managing Director, Chief Finance Officer, Head of Legal etc.*

We at \_\_\_\_\_ (Name of Company)

Recognize that corruption has a devastating impact on the social and economic development of any country. We share in the growing global consensus that action is needed to strengthen transparency and accountability, particularly in international development, trade and investment.

We at \_\_\_\_\_ therefore pledge to support the efforts of the government of Edo State and the Federal Republic of Nigeria and to participate, along with the Edo State Public Procurement Agency and other members of the business community and financing institutions, in forming coalition against corruption.

We \_\_\_\_\_ welcome the actions taken by the government to strengthen transparency and accountability. In this context, we shall:

- Not offer or give any bribes or any other form of inducement to any public official in connection with any Tender;
- Not permit anyone (whether our employee or an independent commission agent) to do so on our behalf;
- Make full disclosure in our bids of the beneficiaries of payments relating to the bids to any person other than our employees but including bonus payments which may be made to employees;
- Formally undertake to issue instructions to all our employees or agents or other representatives in Nigeria directing at all times to comply with the constitution and laws of the Federal Republic of Nigeria and in particular not to offer or to pay bribes or other form of inducement to officials, whether directly or indirectly.

Name in Full: \_\_\_\_\_

Designation / Position: \_\_\_\_\_

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

**FOR OFFICE USE ONLY**

Name of Designated Officers: \_\_\_\_\_

Signature of Designated Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Qualified

Disqualified

Remark/ Comment: \_\_\_\_\_

MD/ CEO Signature: \_\_\_\_\_ Date: \_\_\_\_\_