|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | **VENDOR REGISTRATION FORM** |

|  |
| --- |
|  |

 |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|

|  |
| --- |
| Declaration and Data Privacy Consent: The information I have given is true, correct, and complete. By submitting this form, I authorize the Philippine Ports Authority to collect, use, process and retain my personal data in accordance with the PPA’s Privacy Statement and for purposes specified in this form.  |

 |
| **Reminder:** |  |  |
| 1. Please see reverse for the general instructions on how to fill out the form. |  |  |
| 2. Asterisks (\*) are mandatory fields, fill-up. Shaded items no need to fill-up. |  |  |  |  | **USR No(s):** |  |  |  |
| 3. Accomplish one (1) copy per Vendor. |  |
| 4. Submit accomplished Vendor Registration Form to the Procurement Officers |  |  |  |  |  |  |  |  |  |  |
| of the Resources Management Division for PMO/PDO or the Administrative |  |
| Services Department for HO. |  |
| 5. Attach required supporting documents to this form. |  |
| **\* Action:** [C] Create / [R] Revise / [D] Delete | **Vendor Code:***(System Generated)*  |  |  |   |  |  |  |   |   |   |   |   |   |   |   |   |  |
| **To be fill out by Vendor** |  |
| **Vendor Details** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| **\*Vendor Name:** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|  |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |
| **\*Short Name:** |   |   |   |   |   |   |   |   |   |   |  | **DTI Registration number:**  |   |   |   |   |   |   |   |   |   |   |  |   |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |
| **\*Address:** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |
| **\*Postal/Zip Code:** |  |   |   |   |  |  |  |  | **\*Business Type:Individual/Corporation** |  |   |   |   |   |   |   |   |   |   |   |   |   |  |   |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |
| **\*TIN:** |   |   |   |  |   |   |   |  |   |   |   |  |   |   |   |  |  |  |  **\*Government Sector (Y/N)?** |  |  |   |  |
| **Communications** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |
| **\* Contact Name** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| **\*Telephone 1:** |   |   |   |   |   |   |   |   |   |   |   |   |  | **Fax No.** |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |  |
| **\*Telephone 2:**  |   |   |   |   |   |   |   |   |   |   |   |   |  | **E-mail:** |  |   |  |   |  |
| **Additional Information:** |  |  |  |
| **Prepared by:** |  |   | **Date:**  |   |   |   |   |   |   |   |   |  |
|  | Signature over printed name |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| **For PPA Accounting Use Only** |  |
| **\*PPA Office:** |   | **\*Vendor Type:** (pls see reverse for details) |   |   |   |   |  |
| **\*Vendor Group:** (check only 1 that applies) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |
|  Contractor Forwarding Agent Gov't Office Insurer Manufacturer Port User Vendor BOD Others |  |
| **Control Account:** |   |  | **Payment On-Hold:**  |  Yes No |  |  |  |  |   |  |
| **Payment terms:** |   |  | **Payment Method:** |   |  |  |  |   |  |
| **Input Tax Code:** (check only 1 that applies) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |
|  IV-E VAT Exempt IV-Z Input VAT Zero IV-C Input VAT on VAT able IV-S Input VAT on l 1: Input VAT on Goods |  |
|  Purchases Rated Tax Purchases Capital Goods Purchases VATable Services other than Capital Goods |  |
| **Remarks:**  |   |  |
|  |  |  |  |  |
| **Prepared By:**(Signature over printed name) | **Authorized By:**(Signature over printed name) | **Encoded By:**(Signature over printed name) | **Checked By:**(Signature over printed name) |  |
| **Date:** | **Date:**  | **Date:**  | **Date:**  |  |

Help us serve you better. Please take a moment to give us your feedback by scanning the QR code and submitting the accomplished form. Thank you.



|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **General Instructions** |  |  |  |  |  |  |  |  | **Vendor Type Code** | **Description** |
| For PPA Accounting use Only |  |  |  |  |  |  |  |  |  |  |  |   | S4 | Shipping Services |
| 1. Indicate the PPA Office, Vendor Group and Vendor Type in the spaces provided |  |   | T0 | Telecommunication |
|  |   | T1 | Tours & Travel |
| Example: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   | T2 | Towing/Tugging Service |
| PPA Office: **PMO-North Harbor** |  |  |   | T3 | Trucking/Hauling Services |
| Vendor Group: **M000 - Manufacturer** |  |  |   | V0 | Vendor - Automotive Supplies |
| Vendor Type: **M3 - Manufacturing/Processing Industries** |  |  |   | V1 | Vendor - Computer Supplies |
| Below is the complete **Listing of Vendor Type** for quick reference: |  |   | V2 | Vendor - Construction Materials and Supplies |
| **Vendor Type Code** | **Description** |  |   | V3 | Vendor - Gasoline |
|  |   | V4 | Vendor - Office Furniture, Fixtures, Equipment |
| B0 | Banking Services |  |   | V5 | Vendor - Office Supplies |
| B1 | Brokerage Services |  |   | V6 | Vessel Maintenance/Repair Service |
| B2 | Bunkering |  |   | W0 | Warehousing Service |
| C0 | Canteen/Restaurant Service/Food Services/Chandling |  |   | W1 | Wastes Disposal Service/Oil Sludge |
| C1 | Cargo Checking |  |   | W2 | Water Suppliers/Watering Services |
| C2 | Cargo Consolidation/Forwarding Services |  |   | W3 | Water Taxi |
| C3 | Cargo Handling Service |  |   | W4 | Weighbridge/Truck Scale Operation |
| C4 | Cargo Surveying |  |   | W5 | Xerox Rental |
| C5 | Communication/Postal Services |  |   | U1 | Utilities |
| C7 | Container yard/Container Freight Station |  |   | 2. The Control Account is pro-supplied. |  |
| C8 | Cooperatives |  |   | Example: |  |
| C9 | Curio Shops/Stores |  |  Control Account: **8-81-600 Payables Trade/ Business** |  |
| D0 | Dredging Service |  |   | 3. The Payment Terms is pre-supplied. |  |
| E0 | Equipment/Appliance Hire/Rental |  |   | Example: Payment Terms: **C0000 - Cash** |  |  |
| F0 | Forwarding Agent |  |   | 4. The Payment On-Hold is pre-supplied. |  |  |  |  |
| F1 | Freight Services |  |   | Example: |  |  |  |  |  |  |  |  |  |  |  |  |
| F2 | Fumigation |  |   | Payment On-Hold: X NO |  |  |  |  |  |  |  |
| G0 | Gasoline/Fuel Stations |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| I0 | ID Lamination |  |   | 5. The Payment Method Code is pre-supplied. |  |  |  |
| I1 | Import/Export |  |   | Example: |  |  | XX |  |  |  |  |  |  |  |  |  |
| I2 | Industrial & Marine Services |  |   | Payment Method: **AUTOMATIC CHECK** |  |
| I3 | Insurance |  |   | 6. Indicate the Withholding Tax Code applied to the Vendor by placing a check in the appropriate box provided. |  |
| J0 | Janitorial |  |   |  |
| J1 | Job Order Employee |  |   |  |
| L0 | Laundering Services |  |   | Example: |  |  |  |  |  |  |  |  |  |  |  |  |  |
| L1 | Lighterage/Barging Operation |  |   | **X IV-E: VAT Exempt Purchases** |  |  |
| L2 | Lodging Inns/Hostel/Hotel |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| M0 | Machinery Shop / Motor Shop |  |   | 7. Indicate any additional remarks or information about the Vendor's account. |  |
| M1 | Maintenance Services |  |   |  |
| M2 | Manpower/Manning Services |  |   | Example: |  |  |  |  |  |  |  |  |  |  |  |  |  |
| M3 | Manufacturing/Processing Industries |  |   | Remarks: Manufacturer of Crude Oil |  |  |  |  |  |
| M4 | Marine Hauler of Petroleum Products/Others |  |   | 8. Indicate names and Dates and affix respective signatures of the persons who provided the information, gave authority to encoded, encoded the information, and validated the accuracy. |  |
| M5 | Maritime Related Services |  |   |  |
| M6 | Maritime Surveying |  |   |  |
| N0 | NGO Services |  |   |  |
| N1 | Non-Regular Employee |  |   | Example: |  |  |  |  |  |  |  |  |  |  |
| O0 | Other Government Services |  |   | AlBorbon01/26/04Prepared By/Date | RDPineda01/26/04Authorized BY/Date | SDDela Cruz01/27/04Encoded By/Date |  |
| P0 | Parking/Garage Services |  |   |  |
| P1 | Passenger Terminal Services |  |   |  |
| P2 | Pharmaceutical Services |  |   |  |
| P3 | Photo Shops |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| P4 | Pilotage |  |   | RMMedina01/28/04Checked By/Date |  |  |  |  |  |  |  |  |  |
| P5 | Port Terminal Operators |  |   |  |  |  |  |  |  |  |  |  |
| P6 | Porterage Services |  |   |  |  |  |  |  |  |  |  |  |
| P7 | Power Barge |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| P8 | Print Media/Publication |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| P9 | Project Contractor |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| R0 | Regular Employee |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| R1 | Reproduction Services |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| S0 | Security & Detective Service |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| S1 | Service Contractor |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| S2 | Shipping Agent Services |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| S3 | Shipping Chandling/Cleaning Services |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |