

Contractor KYC Form

CONTRACTOR KYC FORM

SECTION 1: CONTRACTOR INFORMATION

Full Name: _____
Business Name (if applicable): _____
Business Registration Number: _____
Type of Business: () Sole Proprietor () Partnership () Company () Other: _____
Address: _____
Phone Number: _____
Email Address: _____
Website (if any): _____

SECTION 2: IDENTIFICATION DETAILS

ID/Passport Number: _____
Tax Identification Number (TIN): _____
VAT Registration Number (if applicable): _____
Nationality: _____
Date of Birth: //_____
NHBRC Registration Number (if applicable): _____
GB Level: _____

SECTION 3: BANKING DETAILS

Bank Name: _____
Account Name: _____
Account Number: _____
Branch Code: _____
SWIFT Code (if applicable): _____

SECTION 4: BUSINESS DETAILS

Nature of Work/Services Offered: _____
Years of Experience: _____
Major Clients (if any): _____
Industry Certifications/Licenses: _____
References (if any): _____
Previous Experience & Project Values:
Project 1: _____ | Value: _____
Project 2: _____ | Value: _____
Project 3: _____ | Value: _____

SECTION 5: COMPLIANCE & DECLARATION

Have you been blacklisted by any organization? () Yes () No
If yes, please provide details: _____
Do you comply with local labor and tax laws? () Yes () No
Do you have any pending legal matters? () Yes () No
If yes, please provide details: _____

DECLARATION:I, _____, declare that the information provided above is accurate and truthful to the best of my knowledge. I authorize:
Signature: _____ Date: //_____

FOR OFFICIAL USE ONLYReviewed by: _____ Date: //_____

Approval Status: () Approved () Rejected
Comments: _____