



# PALAWAN ELECTRIC COOPERATIVE

Km. 3.35, North National Highway, Barangay Timiquiban, Puerto Princesa City  
 Tel. Nos. 433-2544, 433-9144, 433-5646 local 938  
 Mobile Number +63917 500 0753  
 Email: info.paleco@gmail.com  
 Website: www.paleco.net

## CONTRACTOR ACCREDITATION FORM

Company Name:					
Complete Address (Office)		Telephone No.	Lot Area		
		Fax No.	Floor Area		
		Website	<input type="checkbox"/> Owned <input type="checkbox"/> Rented		
Complete Address (Warehouse/Plant)		Telephone No.	Lot Area		
		Fax No.	Floor Area		
		<input type="checkbox"/> Owned <input type="checkbox"/> Rented			
ORGANIZATIONAL DATA					
Single Proprietorship		Partnership		Corporation	
Name of Owner:		Name of Owner:		Name of Directors:	
		1  2		1. Charmain:	
				Directors:	
				2	
				3	
				4	
President/Chief Executive Officer:					
General Manager:					
Chief Finance Officer/Treasurer:					
Chief Operating Officer:					
DTI Registration No.:		Date Registered:	Valid Until:		
SEC Registration No.:		Date Registered:	Valid Until:		
Date Started Operations:					
BIR Certificate of Registration No.		Tax Identification No.(TIN):	Date Registered:		
Business Permit No.:		Date Registered:	Valid Until:		
No. of Employees / Staff:					
Management:	Supervisory:	Rank and File:	Contractual		
Contact Persons:		Position	Tel. No.	Mobile no.	E-mail Address
(For Technical)					
1					
(For Sales / Marketing)					
1					



<b>PRODUCT / SERVICE DATA</b>			
Nature of Business	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Trading	<input type="checkbox"/> Service/Contractor <input type="checkbox"/> Others (Specify) _____
Product Lines Carried	Brand	Service Offered	
Products Exclusively Carried	Brand & Principal/Manufacturer		
<b>MACHINERY / EQUIPMENT DATA</b>			
Machineries	Equipment	Tools	
<b>CUSTOMER / CLIENT DATA</b>			
Name of Customer	Address	Contact Person/Tel. no.	
1			
2			
3			
4			
5			
<i>Kindly provide customer references for the last 2 years. If more than 5 references, please attach separate sheet.</i>			
<b>BANK INFORMATION</b>			
Name of Customer	Address	Contact Person/Tel. no.	
1			
2			
3			
4			
5			
6			
<b>For INDENT SUPPLIERS only:</b>			
Name of Principal	Country of Origin	Product	
1			
2			
3			





**LIST OF REQUIRED ACCREDITATION DOCUMENTS:**

**I. FOR PARTNERSHIP AND CORPORATION:**

- Business/Mayor's Permit
- BIR Certificate (BIR Form 2303)

**II. FOR SOLE PROPRIETORSHIP:**

- Audited Financial Statements for the last three (3) years (Balance Sheet/Profit and Loss Statement)
- Business/Mayor's Permit
- BIR Certificate (BIR Form 2303)

**III. FOR INDIVIDUAL APPLICANT:**

- TIN Documents
- Curriculum Vitae
- Certification / License, *if any*

**IV. FOR FOREIGN APPLICANT:**

- Company Registration
- Audited Financial Statements for the last three (3) years (Balance Sheet/Profit and Loss Statement)

**Note: Submit any of the following, if applicable**

- Distributorship Agreement (updated)
- Certificate of Membership in Industry Organization
- ISO Certificate

The undersigned, duly authorized to sign behalf of \_\_\_\_\_ hereby declares that the foregoing are true and correct.

\_\_\_\_\_  
Signature over Printed Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date