

		NEW SUPPLIER REQUEST FORM
		CSP Details
	1	Date:
	2	CSP Name:
	3	Signature:
	4	CSP Company seal/stamp:
	5	Request Details:
		Addition Request (AR) Deletion Request (DR)
e Only		
	6	Supplier (CSP) Details:
		Category of Product / Service:
Use		Address (Physical):
CSP		Address (E-Mail):
Ü		Telephone No.
For		Contact Person:
		Terms of Payment:
		PIN No.
		VAT No.
		Bank Account No.
		Transaction Currency:
		Supplier References:
	_	
	7	Justification[For Change Of Business Details Only (only applicable during
		change of business details)
Use Only	8	Approval: Head of Department
		Name:
		Signature:
Ε		Date:
For Safaricom Us		
	9	Approval: Supply Chain Manager
		Name:
ō		Signature:
		Date: