



ACCREDITED SUPPLIER UPDATE FORM

FM-GBP-MMD-PO-017 | REV. 00

Name of Company			
Address			
Telephone Number		Fax Number:	
Email Address		Mobile Number	
Contact Person			
Category (CORPORATION, PROPRIETORSHIP, PARTNERSHIP)		DTI Certificate Valid Until:	
Product Lines			
Required Documents	Submitted (Y/N)		
Latest Audited Financial Statement	<input type="radio"/> Yes <input type="radio"/> No		
Latest Income Tax Return	<input type="radio"/> Yes <input type="radio"/> No		
Current Mayor's / Business Permits	<input type="radio"/> Yes <input type="radio"/> No		
Additional Required Documents for Service Providers/Contractors			
DOLE 1020 Certificate	<input type="radio"/> Yes <input type="radio"/> Not Applicable <input type="radio"/> No		
DO 174 Certificate	<input type="radio"/> Yes <input type="radio"/> Not Applicable <input type="radio"/> No		
PCAB	<input type="radio"/> Yes <input type="radio"/> Not Applicable <input type="radio"/> No		
Exclusive / Authorized Distributorship Certificates	Item/s with Distributorship Agreement/Certificate	Company	Valid until

To be filled-up by Global Business Power Corporation

Date Received: _____ Accreditation Approval Validity: _____