

<b>GOA ANTIBIOTICS AND PHARMACEUTICALS LTD.</b>  QUALITY ASSURANCE DEPARTMENT	<b>VENDOR REGISTRATION</b>	FORM NO. : VS01/03 ISSUE DATE : AUG. 2003 REV. No. : 00 PAGE No. : 1 of 2
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**( A ) BASIC INFORMATION**

SR. No.	DESCRIPTION	INFORMATION
1.	Name of the Vendor Firm	:
2.	Type of Firm	:
3.	Name of the Proprietor / MD / Director	:
4.	Office Address (with telephone, fax No., E-mail I.D. )	: _____ _____ _____
5.	Drug Licence No. And / Or Manufacturing Licence No. ( Enclosed Photo copy - Annexure I )	: _____ _____
6.	C.S.T. No.	:
7.	E.C.C. No.	:
8.	S.T. No. / T.I.N. No.	:
9.	P.A.N. No.	:
10.	Date of Commencement of the Business	:
11.	Name and Address of Banker (S)	: _____ _____
12.	Total Annual Turnover	:
13.	Enclosed list of Items intended to supply under approval stating principal manufacturer of each material (Annexure II)	:
14.	List of Major Clients ( Enclosed List - Annexure III )	:

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**( B ) ADDITIONAL INFORMATION**

SR. No.	DESCRIPTION	INFORMATION
1.	Factory / Business Location Address (with telephone, fax No., E-mail I.D. )	: _____ _____ _____
2.	Total Area ( Premises )	:
3.	Total Built-up area ( Manufacturing, Testing, Input material and Finished Goods Storage Area give separately )	: _____ _____
4.	Installed Capacity ( If required bifurcate according to the activities - Annexure IV )	:
5.	List of Items manufactured / Stored Category wise ( Annexure V )	:
6.	List of Laboratory equipments & Manufacturing equipments including store ( Annexure VI )	:
7.	List of Technical Staff ( for testing, manufacturing & Store ) - Annexure VII	:
8.	Photo Copy of GMP / ISO Certificate ( Annexure VIII )	:
9.	Enclose brief information about Quality Assurance / Management System	:
10.	Enclose Stability Study Data of Materials intended to supply - Annexure IX	
11.	Enclose list of samples submitted for Approval - Annexure X	

Signature Of  
Proprietor / Director \_\_\_\_\_

Date :

Company Seal