

<b>Vendor Registration Form</b> <b>If you would like your company to be included in our database of potential vendors, please fill out this form (Complete) and submit it by email to <a href="mailto:KabulGSOProcurement@state.gov">KabulGSOProcurement@state.gov</a></b>	
Company Name	
Complete Street Address	
Country / City	Country: _____ City: _____
Postal Code	
Full Name of Point of Contact	
Position / Title	
Telephone	Land Line# _____ Mobile # _____
Fax (if available)	
Email	
Web Page	
CCR Registration	Registered: <input type="checkbox"/> Yes <input type="checkbox"/> No Registration date _____
DUNS Number	
JCCS#	Registered: <input type="checkbox"/> Yes <input type="checkbox"/> No Registration date _____
*SAM REGISTRATION Yes <input type="checkbox"/> No <input type="checkbox"/> (mandatory)	If not, please do so as soon as possible. Link at the bottom.
CAGE #	
NCAGE#	
LOCAL LICENSE #	
AISA #	
** NAICS# Main Business Industry (indicate main business activity per NAICS Classification) e.g. Construction / Mining	
Subcategory: Indicate three (03) other businesses your company does) e.g. Wholesale goods, appliances, electronics, etc.	
Brief Description of the Company Activity (attach max two (02) pages):	

\*SAM (System for Award Management)

[https://www.fsd.gov/app/answers/detail/a\\_id/148](https://www.fsd.gov/app/answers/detail/a_id/148)

\*\*NAICS (North American Classification System)

<http://www.naics.com/search.htm>