

Subcontractor (Company) Registration Form

I: Company Particulars

Name of Company : _____
Place of Registration : _____
Business Registration No. : _____
Registered Address : _____

Contract Person/Title : _____
E-mail Address: _____ Fax: _____ Tel: _____

II: Corporate Information

Total Paid-up Capital : _____
Shareholders/Members* : _____

Directors* : _____

* Provide full list of members and directors and declare any relationship with City University staff or CPS staff, if any.

III: Scope of Services Available #

IV: Major Job Reference for 3 Years #

<u>Job Description</u>	<u>Client</u>	<u>Amount</u>	<u>Status</u>

Provide supplementary sheets if necessary

Notes:

- (1) A copy of valid Business Registration Certificate should be attached for record.
- (2) Subcontractor is requested to notify CPS in writing any subsequent change(s) of the above details.

Name of Person-in-Charge for filling in this form : _____

Signature : _____

Date of Submission : _____

After completing this form, please return together with a copy of the Subcontractor's valid Business Registration Certificate to:

CityU Professional Services Limited, 83 Tat Chee Avenue, Kowloon, Hong Kong.

(Tel: 3442 6241 Fax: 2628 2802)