



REPUBLIC OF THE PHILIPPINES  
DEPARTMENT OF BUDGET AND MANAGEMENT  
PROCUREMENT SERVICE



## PhilGEPS Supplier Registration

Register with the **Philippine Government Electronic Procurement System (PhilGEPS)** and have easy access to a single source of government procurement opportunities. PhilGEPS is an internet-based e-procurement system where bid notices for the procurement of goods and general support services, civil works and consulting services are advertised and bid results or awards are posted.

Pursuant to Section 8.5.1 of the Implementing Rules and Regulations A of **R. A. 9184**, otherwise known as the **Government Procurement Reform Act**, "*Manufacturers, suppliers, distributors, contractors and/or consultants shall register with the PhilGEPS. All procuring entities already maintaining an electronic registry upon the effectivity of this IRR-A shall integrate the same with that of the PhilGEPS. A manufacturer, supplier, distributor, contractor and/or consultant duly registered with the PhilGEPS may participate in a procurement undertaken by any procuring entity, provided that the said manufacturer, supplier, distributor, contractor or consultant maintain its registration current and updated in accordance with the provisions of this IRR-A, and its registration is proper and relevant to the particular type of procurement.*"

Be part of the **PhilGEPS** now. You may **REGISTER** at [www.philgeps.net](http://www.philgeps.net) (fill-out the attached form) and secure your PhilGEPS Certificate of Registration. **Certificate Fee** is Php500.00/certificate. Check payments shall be for the account of the **Procurement Service**. Supplier training is conducted at Unit 2504, Raffles Corporate Centre, F. Ortigas Jr. Road (formerly Emerald Avenue), Ortigas Center, Pasig City. **Training Fee** is Php1000.00/participant, inclusive of training kit and snacks. **FOR SCHEDULES OF TRAINING, COORDINATE WITH THE GEPS SUPPLIER GROUP.**

Availability of the PhilGEPS Certificate of Registration is two(2) days after receipt of request. The certificate is valid for one(1) year from date of issue. Payment for renewal is Php500.00. **To claim the PhilGEPS Certificate of Registration**, a valid ID with picture must be presented and a xerox copy of the same. For a representative, his valid company ID laminated with picture, an authorization letter duly signed by the company owner or president, and the photocopy of company ID laminated with picture of the authorizing officer. **A representative may claim only one certificate at a time. The "No document, No Certificate" rule shall be STRICTLY observed.**

**For provincial suppliers**, payment shall be deposited to any **Land Bank branch (Account Name: Procurement Service: Account Number 1442-1031-15, UN Avenue Branch)**. The **Original Copy** of the machine validated deposit slip and this registration form duly filled out, must be mailed together with a company addressed prepaid envelope. Please allow 2 days to receive the certificate.

For **inquiries, reservation and confirmation**, you may contact the **PhilGEPS Supplier Group** at telephone numbers **900-5232, 900-5233, 9005235**, and **900-5237** or e-mail at [supplier@procurementservice.org](mailto:supplier@procurementservice.org).

Please fill-out the registration form on the next page **completely** and **legibly**. You may submit this form thru fax at (02)9005239 or thru email at [supplier@procurementservice.org](mailto:supplier@procurementservice.org)

# PhilGEPS SUPPLIER REGISTRATION FORM

(IMPORTANT: Fields marked with asterisk(\*) as required)

**ORGANIZATION NAME:** \_\_\_\_\_

Form of Organization\*

- |                                      |  |                                     |
|--------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Cooperative | <input type="checkbox"/> Single Proprietorship | <input type="checkbox"/> Individual |
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership           |                                     |

Organization Type\*:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Exclusive/Sole Distributor | <input type="checkbox"/> Information Technology | <input type="checkbox"/> Telecommunications |
| <input type="checkbox"/> Trading/Gen. Mdse.         | <input type="checkbox"/> Manufacturer           | <input type="checkbox"/> Solutions Provider |
|   | <input type="checkbox"/> System Integrator      | <input type="checkbox"/> General Contractor |
|   |   | <input type="checkbox"/> Consultancy        |

Nature of Business/Product Line\*: \_\_\_\_\_

Business Tax Identification Number\*: \_\_\_\_\_

DTI Registration Number: \_\_\_\_\_

SEC Registration Number: \_\_\_\_\_

CDA Registration Number (For Cooperatives): \_\_\_\_\_

Incorporation Date\*: \_\_\_\_\_

Number of Employees\*: \_\_\_\_\_

Capitalization\*: (Php) \_\_\_\_\_

Previous Year's Revenue\*: (Php) \_\_\_\_\_

Web Site Address: \_\_\_\_\_

## ORGANIZATION ADDRESS

Country\*: \_\_\_\_\_

Region\*: \_\_\_\_\_

Province\*: \_\_\_\_\_

City/Municipality\*: \_\_\_\_\_

Street Address\*: \_\_\_\_\_

Zip Code: \_\_\_\_\_

## CONTACT INFORMATION

*This contact will be the Supplier Coordinator (primary contact) for the Organization.*

Salutation Title\*:  Mr.  Ms.

First Name\*: \_\_\_\_\_

Middle Name\*: \_\_\_\_\_

Last Name\*: \_\_\_\_\_

Corporate Title\*: \_\_\_\_\_

Telephone Number\*: ( \_\_\_ \_\_\_ ) \_\_\_\_\_ Local: \_\_\_\_\_

Fax Number: ( \_\_\_ \_\_\_ ) \_\_\_\_\_ Local: \_\_\_\_\_

E-mail Address\*: \_\_\_\_\_