## THE UNITED REPUBLIC OF TANZANIA



PAYEE REGISTRATION FORM(To be Filled in by prospective Payee)				
<b>SECTION A: PAYEE DETAILS</b>				
(TIN/ Check Number/PF No):		Name:		
Address P.O. Box: Street: Region: Mobile: Email:		Classific	cation:	Contractor Consultant  Supplier Other
Government institution  SECTION B: PAYEE BANK DETAILS				
Bank Name				
Account Name				
Bank Account Number				
Branch Location				
Account Type	Savi	ing		Current
I hereby declare, that all of the information I have provided is complete and correct				
Payee Signature :				_
Date:				_
SECTION C: FOR OFFICIAL USE ONLY				
Created By :		_	Appro	roved By :
Date:	_		Date:	e: :
Institution Name:				
<ul> <li>NB:</li> <li>1. This form must be filled by either a company, A Government institution or an individual</li> <li>2. This form must be stamped if payee is a company or a Government institution</li> </ul>				