

DUPLICATE

For office use only	
Deposit amount Rs
Receipt No
<input type="checkbox"/>
	Accountant/CMSO

Colombo Municipal Council

Municipal Treasurer's Department

Tenders Application for leasing Crow Island Beach Park Restaurant

- (1) Name of the tenderer:.....
- (2) Business address :.....
- (3) Personal Address
-
- (4) Telephone Number: Office:.....Personal:.....
- (5) National Identity Card Number:.....
- (6) Quoted tender amount (Rental without tax)
In numbers.....
In letters.....
- (7)Tender deposit amount Rs.....
- (8)Receipt number & date of payment.....
- (9)Income tax file number & VAT file number.....
- (10) Business Registration certificate number & date.....(annexure No.....)
- (11) Revenue and expenditure account information of the business audited for the last
three years(annexure No.....)
- (12) Whether registered with the tourist board?.....
If so, registration number & date:.....
- (13) Experience in running restaurants:.....
Whether there are trained staff associate with registrations:.....

I here by state that I am not submitting this tender on behalf of anyone other than myself and I hereby state that I have read and understood all the terms and conditions of this tender and wish to abide by them in full. I am well aware that all the information provided in this application is true and correct and that the Municipal Commissioner of the Colombo Municipal Council has the power to reject my tender application if it is found that any false information has been submitted. In addition to the tender fee, I will also accept to pay the relevant taxes.

Date:.....

Tender's signature

Witness

1.....

2.....

Name:.....

Name:.....

Address:.....

Address:.....