## THE UNITED REPUBLIC OF TANZANIA



PAYEE REGISTRAT	FION FORM(To be Filled in by prospective Payee)					
SECTION A: PAYEE DETAILS						
(TIN/ Check Number/PF No):	Name:					
Address P.O. Box: Street: Region: Mobile: Email:  SECTION B: PAYEE BANK DE	Classification: Employee  Utility  Contractor  Consultant  Supplier  Other  Government institution    ETAILS					
Account Name						
Bank Account Number						
Branch Location						
Account Type	Saving 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 :	Approved By :					
Date:	Date: :					
Institution Name:						
NB:  1. This form must be filled by either a company, A Government institution or an individual  2. This form must be stamped if pavee is a company or a Government institution						