

**FORM N-100**

**FOR TANZANIAN LOCAL SUPPLIERS AND SERVICE PROVIDERS (LSSP) DATABASE IN THE PETROLEUM SUBSECTOR**

| For EWURA use Only | Date Stamp | Receipt | Action Block |
|--------------------|------------|---------|--------------|
| Remarks            |            |         |              |

**Type or print in black ink.** Type or print “N/A” if an item is not applicable or the answer is none, unless otherwise indicated. Failure to answer all of the questions may delay the Energy and Water Utilities Regulatory Authority (EWURA) processing your Form N-100. **NOTE: You must complete Parts 1 to 11.**

Before you consider filling out this application, please visit the EWURA website at [www.ewura.go.tz](http://www.ewura.go.tz) for more information on this topic and to review the instruction and guidelines for Form N-100.

**Part 1: Information about You** (Person applying for LSSP Database on behalf of the company)

1. Your Current Legal Name (**do not** provide a nickname)

Family Name (Last Name)                      Given Name (First Name)                      Middle Name (if applicable)

|  |  |  |
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2. Your Name Exactly as it appears on your permanent identification card (if applicable)

Family Name (Last Name)                      Given Name (First Name)                      Middle Name (if applicable)

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3. Other Two Names of the Representatives (if any, together with yours attach their credentials)

Family Name (Last Name)                      Given Name (First Name)                      Middle Name (if applicable)

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4. National Identification Number, Driving Licence Number, and Passport Number (if any)

| National Identification Number | Driving Licence Number | Passport Number |
|--------------------------------|------------------------|-----------------|
|                                |                        |                 |

5. Gender, Date of Birth, Place of Birth (for each person listed above)

| Gender (Male/Female) | Date of Birth (dd/mm/yyyy) | Place of Birth |
|----------------------|----------------------------|----------------|
|                      |                            |                |
|                      |                            |                |
|                      |                            |                |

6. Country of Birth, Country of Citizenship, National (for each person listed above)

| Country of Birth | Country of Citizenship | National |
|------------------|------------------------|----------|
|                  |                        |          |
|                  |                        |          |
|                  |                        |          |

**Part 2: Information about your Company**

Fill in the boxes provided as appropriate-

A. Current Physical Address

| Street Number and Name | Apt.     | Ste.   | Flr. | Number |
|------------------------|----------|--------|------|--------|
|                        |          |        |      |        |
| Town or City           | District | Region |      |        |
|                        |          |        |      |        |

B. Telephone, Mobile, Fax and E-mail Addresses

| Telephone | Mobile | Fax | E-mail |
|-----------|--------|-----|--------|
|           |        |     |        |
|           |        |     |        |
|           |        |     |        |

C. Company's Postal Address

| Post Office Box number | Town or City |
|------------------------|--------------|
|                        |              |

**Part 3: Information about Your Eligibility** (Select only one box or your Form N-100 may delay)

You are at least 18 years of age **and**

- A.  Have been a lawful permanent resident of the United Republic of Tanzania for at least 5 years
- B.  Have been a lawful permanent resident of the United Republic of Tanzania for at least 3 years. In addition, you have been married to and living with the same Tanzanian citizen spouse for at least 3 years, and your spouse has been a Tanzanian citizen for the last 3 years at the time you filed your Form N-100
- C.  Are lawful permanent resident of the United Republic of Tanzania and you are the spouse of a United Republic of Tanzania citizen and your United Republic of Tanzania citizen spouse is regularly engaged in specified employment abroad.
- D.  Other (Explain)

**Part 4: Information about the Title of Company**

- A. Name (as shown on your income tax return or any registration certificate) The Name of Company is required at this Line A, do not leave this line blank.

- B. Business Name (if different from above)

- C. Check appropriate box for BRELA (or Tanzania Revenue Authority) registration classification of a person whose name is entered on Line A. Check only one of the following seven boxes.

|   |                           |
|---|---------------------------|
| Individual/sole proprietor or single member LLC | C-corporation             |
| S-corporation                                   | Partnership               |
| Trust/estate                                    | Limited Liability Company |
| Others (see instruction)                        |                           |

**Part 5: Joint Ventures**

| Joint Venture              |                      |
|----------------------------|----------------------|
| Legal names of JV Partners | % of JV shareholding |
|                            |                      |
|                            |                      |
|                            |                      |

**Part 6: Major Activity** (Describe the Major Activity working on)

Select the likely box or boxes describing the major activity you are carrying out. The services rendered include-

|                          |                                      |                          |                                     |
|--------------------------|--------------------------------------|--------------------------|-------------------------------------|
| <input type="checkbox"/> | Engineering (e.g. civil, mechanical) | <input type="checkbox"/> | Legal (civil, criminal, litigation) |
| <input type="checkbox"/> | Construction (e.g. roads, building)  | <input type="checkbox"/> | Insurance/Reinsurance               |
| <input type="checkbox"/> | Food and accommodation services      | <input type="checkbox"/> | Consultancy and Research            |
| <input type="checkbox"/> | Logistics (transportation, storage)  | <input type="checkbox"/> | Farming green vegetables            |
| <input type="checkbox"/> | Private Security                     | <input type="checkbox"/> | Livestock Products (milk, beef)     |
| <input type="checkbox"/> | Poultry Products (egg, chicken)      | <input type="checkbox"/> | Fisheries (soft water, marine)      |
| <input type="checkbox"/> | Others (Explain)                     |                          |                                     |
|                          |                                      |                          |                                     |

**Part 7: Activity Division** (Check specific box or boxes of division being worked on)

Select or describe the activity division you are working on.

|                          |            |                          |                        |
|--------------------------|------------|--------------------------|------------------------|
| <b>A. Engineering</b>    |            | <input type="checkbox"/> | Electrical/Electronics |
| <input type="checkbox"/> | Civil      | <input type="checkbox"/> | Petroleum/Gas          |
| <input type="checkbox"/> | Mechanical | <input type="checkbox"/> | Environmental          |
| <b>B. Legal Services</b> |            | <input type="checkbox"/> | Negotiations           |

|  |          |  |                         |
|--|----------|--|-------------------------|
|  | Civil    |  | Contract Administration |
|  | Criminal |  | Litigation              |

|                            |  |
|----------------------------|--|
| <b>C. Others (Explain)</b> |  |
|----------------------------|--|

**Part 8: Provide details/scope of activities carried out**

**Part 9: Taxpayer Identification Number (TIN) (if applied for write "Applied For" therein)**

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| Enter your TIN in the appropriate box. The TIN provided must match the name given in Part 4 to avoid backup withholding. |  |
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**Part 10: Applicant's Statement, Certification, and Signature**

**NOTE:** Read the Penalties section of the Form N-100 Instructions before completing this part.

**Applicant's Statement**

**NOTE:** Select the box for either Item A or B in Item Number 1. If applicable, select the box for Item Number 2.

1. Applicant's Statement Regarding the Interpreter:
  - A.  I can read and understand English, and I have read and understood every question and instruction on this application and my answer to every question.
  - B.  The interpreter named in Part 12 read to me every question and instruction on this application and my answers to every question in KISWAHILI, a language in which I am fluent, and I understood everything.

2. Applicant's Statement Regarding the Preparer:

|  |   |  |
|--|---|--|
|  | At my request, the preparer named, prepared this application for me based only upon information I provided or authorised. |  |
|--|---|--|

**Applicant's Certification**

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that EWURA may require that I submit original documents to EWURA at later date. Furthermore, I authorise the release of any information from any of my records to EWURA may need to determine eligibility for LSSP database benefit that I seek.

I further authorise release of information contained in this application, in supporting documents, and in my EWURA records to other entities and persons where necessary for the administration and enforcement of the Laws of Tanzania.

I understand that EWURA may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that-

- (1) I reviewed and provided or authorised all of the information in my application;
- (2) I understood all the information contained in, and submitted with, my application; and
- (3) All this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorised all of the information, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.

**Applicant's Signature**

3. Applicant's Signature Date of Signature (dd/mm/yyyy)

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**NOTE TO ALL APPLICANTS:** If you do not completely fill out this application or fail to submit required documents listed in the Instructions, EWURA may deny your application.

**Part 11: Interpreter's and Preparer's Contact Information, Certification, and Signature**

Provide the following information about the interpreter.

**A. Interpreter's Full Name, Business, Addresses, Certification and Signature**

1. Interpreter's Family Name (Last Name)      Interpreter's Given Names (First and Middle)

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2. Interpreter's Business or Organisation Name (if any)

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3. Interpreter's Physical, Postal and E-mail Addresses

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|----------------------|--|
| (a) Physical Address |  |
| (b) Postal Address   |  |
| (c) E-mail Address   |  |

**Interpreter's Certification**

I certify, under penalty of perjury, that I am fluent in English and ..... which is the same language specified in Part 12 and I have read to this applicant in the identified language every question and instruction on this application and his answer to every question. The applicant informed me that he understands every instruction, question and answer on the application, including the **Applicant's Certification** and has verified the accuracy of every answer.

**Interpreter's Signature**

Date of Signature (dd/mm/yyyy)

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**B. Preparer's Full Name, Business, Addresses, Certification and Signature**

1. Preparer's Family Name (Last Name)      Preparer's Given Names (First and Middle)

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|--|--|

2. Preparer's Business or Organisation Name (if any)

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3. Preparer's Physical, Postal and E-mail Addresses

|                      |  |
|----------------------|--|
| (a) Physical Address |  |
| (b) Postal Address   |  |
| (c) E-mail Address   |  |

**Preparer's Statement**

- (a)  I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.
- (b)  I am an attorney or accredited representative and my representation of the applicant in this case ..... extends ..... does not extend beyond the preparation of this application.

**Preparer's Certification**

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he understands all the information contained in, and submitted with, his application, including the **Applicant's Certification**, and that all of this information is complete, true, and correct. I completed this application based on information the applicant provided to me or authorised me to obtain or use.

**Interpreter's Signature**

Date of Signature (dd/mm/yyyy)

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**Part 12: Oath of Allegiance**

I hereby declare on oath:

- (a) that I will support and defend the Constitution and laws of the United Republic of Tanzania;
- (b) that I will bear true faith and allegiance to the same;
- (c) that I will bear arms on behalf of the United Republic of Tanzania when required by the law;
- (d) that I will perform work of national importance under civilian direction when required by the law; and
- (e) that I will take this obligation freely, without any mental reservation or purpose of evasion; so help me God.



**Part 12: Applicant's Name and Signature**

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

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Applicant's Signature

Date of Signature (dd/mm/yyyy)

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**Energy and Water Utilities Regulatory Authority**  
Dodoma, 2021