

Registration Form | ރަޖިސްޓްރޭޝަން ފޯމް

We confirm that we have read and understood the bid documents under RFP number given below and hereby register to this bid

Project Name	171-M(F2)/IUL/2023/350
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To provide medical treatment to the employees and their families on a credit basis

Project Officer's Information

as_5147@police.gov.mv	9790052
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Name (In English)

Name (In Dhivehi)

Email	Contact Number
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Information of Representative

First Name	Last Name
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NID Card Number	Designation
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Email	Contact Number
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Please send the completed form to the email addresses given in the RFP and collect the registration number. Registration will be confirmed once you receive the registration number