Public Procurement
Regulatory Authority
E- Pak Acquisition & Disposal System

E-Pak Acquisition & Disposal Sytem (EPADS)

Head of Department Form

1. Personal Information

First Name :

Last Name :

CNIC :

2. Official Information

Ministry/Department :

Designation :

Name of Procuring Agency/Office :

Name & Designation of Supervising/Controlling Officer :

3. Contact Information

Official Email :

Official Mobile no : +92

Official Landline no : +92

4. Adress Information

Capital/Province :

District :

Division :

Tehsil :

Office Address :

Special Instructions:

- Please provide an **official email** address associated with your Ministry/ Department. **(no personal email address and cell phone no)**
- Ensure that the mobile number entered is your **official contact number**.
- Enter your complete and accurate office address, including all necessary details.
- **Review all information carefully before submitting the form.**

☐ **I acknowledge that the information provided above is true, complete, and accurate.**

Date : _____ **Signature :** _____