



REGISTRATION FORM

Application No.: _____ Date : _____

1. Name of Company / Firm : _____

Branch Address : _____

Constitution : Company / Partnership Firm / Proprietorship / LLP : _____

2. Details of Directors / Partners / Proprietor (As the Case May be)

(A) Name : _____

Address : _____

Phone No. / Mobile No.: _____

(B) Name : _____

Address : _____

Phone No. / Mobile No.: _____

(C) Name : _____

Address : _____

Phone No. / Mobile No.: _____

(D) Name : _____

Address : _____

Phone No. / Mobile No.: _____

(E) Name : _____

Address : _____

Phone No. / Mobile No.: _____

3. Bank Account No.: _____
4. Bank Name : _____
5. Bank Address : _____
6. Bank MICR No.: _____
7. Telephone No.: _____
8. Fax / Email : _____
9. Mobile No.: _____
10. PAN No.: _____
11. GST No.: _____
12. TIN No.: _____
13. Contact Person : _____
14. Reference : _____
15. Name of Person, who take delivery :

Photograph

Photograph

Photograph

Photograph

Signature

Signature

Signature

Signature

16. Please Attach Copy :

1. Pan Card
2. GSTIN
3. TIN No
4. Cancelled Cheque
5. Address Proof
6. MOA / AOA / Partnership deed
7. Balance Sheet / ITR 2 Years.

AUTHORISED SIGNATORY