Supplier Master Form

General information about the Supplier

Supplier Type					Department Responsible		
Name of Supplier	LYSE	LYSEIS TECHNOLOGIES PVT LTD			Name of Contact Person	SHABNAM	
Supplier Address	OFFICE NO. 508, 5TH FLOOR, SHIVAI PLAZA CO-OP. SOCIETY LTD., OPP. RAVI VIHAR HOTEL, MAROL NAKA METRO STATION, ANDHERI-KURLA ROAD,			Corporate Identification Number (CIN)	U72900MH2022PTC3	95790.	
Country	ANA	ANDHERI (EAST), MUMBAI-400059			State	Maharashtra	
City	MUM	BAI			Postal Code	400059	
Currency	India	n Rupee			Landline Number	97693 25288	
Email Address	shabi	shabnam@lyseistechnologies.com					
Email - Business/ Op's Tea	m	shabnam@lyseistechnologies.co m	Name	Shabnam		Mobile Number	9769325288
Email - Accounts Departme	en	kiran@lyseistechnologies.com	Name	Kiran		Mobile Number	8928724545
Email - CFO		Name			Mobile Number		
Email - CEO Or Director		Name			Mobile Number		

Bank Details					
Beneficiary Name	Bank Name	Bank Account No.	IFSC Code	Bank Branch Code	Swift Code
Lyseis Technologies Private Limited	Kotak Mahindra Bank	9900012345	KKBK0000681	000681	KKBKINBBCPC

	Statutory Details							
PERMANENT ACCOUNT NUMBER (PAN)	GST NUMBER (GSTN)	REGISTRATION		VAT TIN NUMBER (IF APPLICABLE)	(IF APPLICABLE)	PF & ESIC REGISTRATION NUMBER (IF APPLICABLE)		
AAFCL2697C	27AAFCL2697C1ZF	UDYAM-MH-19-0208008						

	Additional Place Of Business							
CONTACT NAME	CONTACT NO	EMAIL	OFFICE ADDRESS	COUNTRY	STATE	CITY	GST NO	GST CERTIFICATE ATTACHMENT

	Type of Business with K-Corp proposed to be provided by the Supplier				
Sr. No	HSN/SAC Code	Description of Goods/ Services			
1	83062990	Supply of IT Goods and services			

Legal Entity								
O Public Ltd Co	ompany 🔘 Pvt Ltc	l Company 🛛 Partne	ership Firm O Proprieto	or Individual	Trust	O LLP	O HUF	O AOP
Agreed Payment Terms (In Days)								
30 Days	◯ 45 Days	O 60 Days	─ 90 Days	O Other :				

Category And Sub Category Data				
Sr. No	Category	Sub Category		
1				

	Registration to be done for entity					
SELECT	ENTITY NAME	ENTITY WISE SUPPLIRE CODE				
	TRAVEL FOOD SERVICES LIMITED - BLR					
	MUMBAI AIRPORT LOUNGE SERVICES PRIVATE LIMITED					
	TRAVEL FOOD SERVICES LIMITED - TFSCPL					
	TRAVEL FOOD SERVICES LIMITED - TFSKPL					
	TRAVEL FOOD SERVICES LIMITED					
	TRAVEL FOOD SERVICES LIMITED - TFS HIGHWAY					
	Semolina Kitchens Private Limited					
	TRAVEL RETAIL SERVICES PRIVATE LIMITED					
	THE IRISH HOUSE FOOD AND BEVERAGE PVT LTD					
	Deluxe Caterers Pvt. Ltd.					
	KAPCO BANQUETS AND CATERING PVT LTD					
	Travel Food Services (Terminal-3) Pvt. Ltd.					
	GMR HOSPITALITY LIMITED					
	QMT LIFESTYLE AND TECHNOLOGY SERVICES PRIVATE LIMITED					
	TFS GURGAON AIRPORT SERVICES PRIVATE LIMITED					

Documents to be submitted				
Status of submission	Documents to be submitted along with Supplier Master Form			
	Copy of PAN card			
	Copy of GST Certificate			
	Copy of VAT Certificate			
	Lower TDS Certificates u/s. 197			
	Valid MSME - Udyam Certificate			
	Valid FSSAI Certificate			
	Copy of PF/ESIC registration Certificate			
	Copy of cancelled cheque/ Details of bank account on letter head along with stamp and sign from Bank			
	Self-Declaration in case of not registered under GST as per threshold limit			
	CIN Number Registration Certificate			
	Document for Modification of Existing Record			

Source Of Information					
Source Of Information	Supplier	Is All Block			
		Is Payment Block			
Additional Information					
Legal Entity		Vt Ltd Company			

Legal Entity	
Permanent Account Number (PAN)	AAFCL2697C
GST Number (GSTN)	27AAFCL2697C1ZF
MSME (UDYAM REGISTRATION NUMBER)	UDYAM-MH-19-0208008
Lower TDS Certificates u/s. 197	
VAT TIN Number	
FSSAI Number	
PF & ESIC registration Number	

"Declaration by local Supplier for registration as Supplier under Respective Entities

1. The nature of business and contact/correspondence details provided by me/us are correct and complete

2. The bank and branch details provided by me/us are correct and complete

3. I/We have furnished my/our Income tax PAN Number. Where I/we have not furnished my/our Income tax PAN Number: I/We understand and agree to receive payments made to me/us, at net of withholding taxes (TDS) at 20%.

4. The GST Registration Certificate furnished by me/us is the latest, updated and GST Registration Certificate. Where I/we have not submitted the GST Certificate: I/We hereby declare and affirm that I/we have not registered with the department, since I/we am/are not required to do so, as per the GST provisions. Accordingly, I/we shall not charge GST on invoices raised on respective entities, either now or in the future, for the period for which I/we have not registered under GST

5. I/We further undertake to immediately inform you regarding any changes to any of the aforesaid particulars . In cases where specific registration numbers have been applied for but have not been obtained, I/we shall furnish copies of the application for registration so made & shall also furnish the registration, immediately upon receipt of the same. Notwithstanding this declaration, Respective entity may, at its sole discretion, require confirmations or any similar documentation or information and I/we agree to co-operate with

all such requests in this regard.

Name

6. I/We declare that all the above information is true, correct and complete, to the best of my/our knowledge and belief. Accordingly, I/We understand that the company is entitled to place reliance on the documents submitted by me/us in good faith.

7. I/We also understand that quoting of any false information in this declaration shall render me /us liable for all applicable legal and penal consequences, for which I/we shall be solely responsible

8. I/We confirm that, if we get MSME registration in coming future, it will be communicated with you by providing valid certificate and we also obtain email confirmation regarding updation of our vendor master database. Till then there will be no liability, provision for Interest / penalty as per MSMED Act 2006 on the entity"

Authorized Signatory/Proprietor/Partner - with Date and Stamp					
SHABNAM	LYSEIS TECHNOLOGIES PVT LTD	27/12/2024			
Signature of Supplier	Stamp	Date			
For Internal use					
Request Department					
	Herambraj Sonawane	02/01/2025			
Name Herambraj Sonawane	Signature	Date			
Approving Manager					

Signature

Date