## Supplier Master Form

## General information about the Supplier

Supplier Type					Department Responsible		
Name of Supplier	KF KITCHEN SOLUTIONS			Name of Contact Person	МЕНВООВ		
Supplier Address	NO.19, 10TH MAIN, MARUTHI INDUSTRIAL AREA, THIGALARAPALYA MAIN ROAD, 4TH PHASE, PEENYA 2ND STAGE			Corporate Identification Number (CIN)	29CQOPP3813J1Z9		
Country	India				State	Karnataka	
City	BANG	GALORE			Postal Code	560058	
Currency	India	n Rupee			Landline Number	9980717248	
Email Address	kfkitc	hensolutions@gmail.com					
Email - Business/ Op's Tea	ım	kfkitchensolutions@gmail.com	Name	Mehaboob	Pasha	Mobile Number	9980717248
Email - Accounts Departme	en	kfkitchensolutions@gmail.com	Name	Mehaboob	Pasha	Mobile Number	9980717248
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	
KF KITCHEN SOLUTIONS	KOTAK MAHINDRA BANK	8447252198	KKBK0008339	KKBK0008339	KKBKINBBBLR	

Statutory Details								
PERMANENT ACCOUNT NUMBER (PAN)		MSME (UDYAM REGISTRATION NUMBER)		VAT TIN NUMBER (IF APPLICABLE)	FSSAI NUMBER (IF APPLICABLE)	PF & ESIC REGISTRATION NUMBER (IF APPLICABLE)		
CQOPP3813J	29CQOPP3813J1Z9	UDYAM-KR-03-0144000						

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

	Type of Business with K-Corp proposed to be provided by the Supplier					
Sr. N	o HSN/SAC Code	Description of Goods/ Services				
1	7326	Commercial Kitchen Equipment Manufacturer				

			Legal Er	ntity				
O Public Ltd Co	mpany 🔵 Pvt Lto	d Company 🛛 Partn	ership Firm 💿 Propriete	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				
Supplier	Is All Block			
	Is Payment Block			
		Supplier Is All Block		

Additional Information				
Legal Entity	Proprietor Individual			
Permanent Account Number (PAN)	CQOPP3813J			
GST Number (GSTN)	29CQOPP3813J1Z9			
MSME (UDYAM REGISTRATION NUMBER)	UDYAM-KR-03-0144000			
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. 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						
МЕНВООВ	KF KITCHEN SOLUTIONS	06/01/2025				
Signature of Supplier	Stamp	Date				
For Internal use						
Request Department						
	Ramendra Singh	06/01/2025				
Name Ramendra Singh	Signature	Date				
Approving Manager						
Name	Signature	Date				