

AGC HOTELWARE

M.G.ROAD, OPP MAHARASHTRA SURGICAL

PUNE 411001, INDIA

EMAIL : info@agchotelware.com

Dear Sir,

Sub: E-Payments vide RTGS/NEFT

I / We request and hereby authorize you to execute E-Payment vide RTGS/NEFT modes to My /Our Bank account as per the details given below:

1 Particulars of Vendor

A. Vendor code * : 3790381

B. Vendor's Name as in the bank : AGC HOTELWARE

C. PAN issued by Income tax (Permanent Account No.): A B M F A 9 6 4 4 D

D. Contact Person Name (if applicable) : VIDYA PAWAR

E. E-Mail id of vendor for payment advice : accounts@agchotelware.com

F. Vendor's Mobile no. : 9370581945

G. Vendor's Address : House No. 157, Old Pulgate Area, M G Road , Camp
Pune City

2 Particulars of Bank Account

A. Bank Account Number * : 3 8 5 8 7 0 0 6 5 5 8
(As appearing on the cheque leaf)

B. Name of the Bank & Branch : STATE BANK OF INDIA (GOLIBAR MAIDAN)

C. Bank Telephone No. with STD Code : +9120 2644 1573

D. Email ID of vendor's Bank * : sbi.07433@sbi.co.in

E. 11-Digit IFSC Code * : S B I N 0 0 0 7 4 3 3

*(Mandatory - Please attach a ORIGINAL cancelled Cheque leaf for verification)

Mob +91 7875481444 • Email : info@agchotelware.com

AGC HOTELWARE

M.G.ROAD, OPP MAHARASHTRA SURGICAL

PUNE 411001, INDIA

EMAIL : info@agchotelware.com

F. Account Type

: Current

Cash Credit

Saving

I/We hereby declare that the particulars given above are correct and complete. I/We confirm that I/we shall bear the charges, if any levied by my/our bank for the credit in our above account through NEFT. If the transaction is delayed or lost because of incomplete or incorrect information, we would not hold the company responsible.

Thanking you,

AGC HOTELWARE
Agarwal
PARTNER

Date: 04.06.2024

Place: Pune

Agarwal
Authorized Signatory & Stamp

Bank Certificate

We confirm that the details given above are correct as per our records.

Date:

Place:

Agarwal
Signature, Code & Stamp of Authorized Bank Official