## **Supplier Master Form**

## **General information about the Supplier**

Supplier Type Department Responsible

Name of Supplier SRI KIRPA EMPIRE EXIM PVT LTD Name of Contact Person RAJESH KUMAR SHRIVASTAVA

Supplier Address GRAND EMPIRE HORECA SUPPLIES Corporate Identification U51109BR2006PTC012711

H NO 264292, ALTO SAULEM , CHOGM ROAD Number (CIN) .PORVORIM

Country NORTH GOA -403521 State Goa

City PORVORIM Postal Code 403521

Currency Indian Rupee Landline Number 88050 25891

Email Address bde@grandempire.in

Email - Business/ Op's Team office@grandempire.in Name KAVITA Mobile Number 7972221589

Email - Accounts Departmen finance@grandempire.in Name RAVI RANJAN Mobile Number 9370918491

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
SRI KIRPA EMPIRE EXIM PVT LTD	CANARA BANK	125004472193	CNRB0017221	17221	CNRBINBBBFD

Statutory Details							
PERMANENT ACCOUNT NUMBER (PAN)	GST NUMBER (GSTN)	MSME (UDYAM REGISTRATION NUMBER)	LOWER TDS CERTIFICATES U/S. 197 (IF APPLICABLE)	VAT TIN NUMBER (IF APPLICABLE)	FSSAI NUMBER (IF APPLICABLE)	PF & ESIC REGISTRATION NUMBER (IF APPLICABLE)	
AAKCS3167K	30AAKCS3167K1Z8	BR26D0046553					

Additional Place Of Business									
CONT		CONTACT NO	EMAIL	OFFICE ADDRESS	COUNTRY	STATE	CITY	GST NO	GST CERTIFICATE ATTACHMENT
	Product & services proposed to be provided by the Supplier								
<b>Sr. No</b>	Sr. No HSN/SAC Code Description of Goods/ Services								
	•								
					Legal Entity	,			
O Public	O Public Ltd Company  Pvt Ltd Company  Partnership Firm  Proprietor Individual  Trust  LLP  HUF  AOP								
Agreed Payment Terms (In Days)									
● 30 Days									
Category And Sub Category Data									
Sr. No	Categor	у		Sub Category					
1									

Registration to be done for entity					
SELECT	ENTITY NAME	ENTITY WISE SUPPLIRE CODE			
	BLR LOUNGE SERVICES PRIVATE LIMITED				
	MUMBAI AIRPORT LOUNGE SERVICES PRIVATE LIMITED				
	TRAVEL FOOD SERVICES CHENNAI PRIVATE LIMITED				
	TRAVEL FOOD SERVICES KOLKATA PRIVATE LIMITED				
<b>✓</b>	TRAVEL FOOD SERVICES PRIVATE LIMITED				
	TFS (R&R Works) Private Limited				
	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				

Documents to be submitted							
Status of submission	Documents to be submitted along with Supplier Master Form						
$\checkmark$	Copy of PAN card	Copy of PAN card					
<b>✓</b>	Copy of GST Certi	tificate					
	Copy of VAT Certif	ificate					
	Lower TDS Certific	icates u/s. 197					
<b>✓</b>	Valid MSME - Udy	yam Certificate					
	Valid FSSAI Certif	ficate					
	Copy of PF/ESIC	registration Certificate					
<b>✓</b>	Copy of cancelled	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		Pvt Ltd Company					
Permanent Account Number (PAN)		AAKCS3167K					
GST Number (GSTN)		30AAKCS3167K1Z8					
MSME (UDYAM REGISTRATION NUMBER)		BR26D0046553					
Lower TDS Certificates u/s. 197							
VAT TIN Number							
FSSAI Number							
PF & ESIC registration Numb	er						

## "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						
RAJESH KUMAR SHRIVASTAVA	SRI KIRPA EMPIRE EXIM PVT LTD	05/09/2024				
Signature of Supplier	Stamp	Date				
For Internal use						
Request Department						
	Cleyton Dcosta	11/09/2024				
Name Cleyton Dcosta	Signature	Date				
Approving Manager						
Name	Signature	Date				