Supplier Master Form

General information about the Supplier

Supplier Type				Department Responsible			
Name of Supplier	LORI	LORMAN KITCHEN EQUIPMENTS PRIVATE LIMITED			Name of Contact Person	CHANDRA	
Supplier Address			Corporate Identification Number (CIN)	U29248KA2014PTC076905.			
Country	India				State	Karnataka	
City	BAN	GALORE			Postal Code	562132	
Currency	India	n Rupee			Landline Number	9900415255	
Email Address	moul	@lorman.in					
Email - Business/ Op's Tea	m	mouli@lorman.in	Name	Lalitha C		Mobile Number	9900415255
Email - Accounts Departme	en	info@lorman.in	Name	PUSHPA		Mobile Number	8495022288
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	
LORMAN KITCHEN EQUIPMENTS PRIVATE LIMITED	ICICI BANK	344005000685	ICIC0003440	003440	ICICINBBNRI	

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)	
AACCL7806L	29AACCL7806L1Z2	UDYAM-KR-03-0293850					

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

	Product & services proposed to be provided by the Supplier				
Sr. No	HSN/SAC Code	Description of Goods/ Services			
1	85142000	COMMERCIAL INDUCTION STOVE			
2	998719	SERVICE OF INDUCTION STOVE			

	Legal Entity								
O Public Ltd	Company) Pvt Ltd Company	O Partnership Firm	O Proprie	tor Individual	O Trust	O LLP	O HUF	O AOP
			Agree	d Payment ⁻	Terms (In Day	ys)			
⊖ 30 Days	🔵 45 Da	ays 🔿 6	0 Days	90 Days	Other	r : 100% AI	DVANCE		
	Category And Sub Category Data								
Sr. No Cat	Sr. No Category 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					
	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					
	QMT LIFESTYLE AND TECHNOLOGY 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				
V	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		ls All Block Is Payment Block	

Additional Information				
Legal Entity	Pvt Ltd Company			
Permanent Account Number (PAN)	AACCL7806L			
GST Number (GSTN)	29AACCL7806L1Z2			
MSME (UDYAM REGISTRATION NUMBER)	UDYAM-KR-03-0293850			
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					
CHANDRA	LORMAN KITCHEN EQUIPMENTS PRIVATE LIMITED	24/09/2024			
Signature of Supplier	Stamp	Date			

For Internal use

Request Department			
		Ramendra Singh	24/09/2024
Name Ra	amendra Singh	Signature	Date
Approving Manager			
Name		Signature	Date