

Supplier Master Form

General information about the Supplier

Supplier Type		Department Responsible	
Name of Supplier	ORCHID	Name of Contact Person	MR MUMKESH CHOPRA
Supplier Address	495, HSIIDC PHASE-IV, SECTOR-57, KUNDLI, TEHSIL RAI, SONIPAT - 131028	Corporate Identification Number (CIN)	na
Country	India	State	Haryana
City		Postal Code	131028
Currency	Indian Rupee	Landline Number	1145000132
Email Address	info@orchidisplay.co		
Email - Business/ Op's Team	info@orchidisplay.co	Name	Ali
		Mobile Number	9999105091
Email - Accounts Departmen	financeorchid2@gmail.com	Name	Vikas
		Mobile Number	9999105092
Email - CFO	orchidhotelware@gmail.com	Name	Mukesh Chopra
		Mobile Number	9811331538
Email - CEO Or Director		Name	
		Mobile Number	

Bank Details

Beneficiary Name	Bank Name	Bank Account No.	IFSC Code	Bank Branch Code	Swift Code
ORCHID	HDFC	'03398020000162	HDFC0000339	339	HDFCINBBDEL

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)
AABFO2740E	06AABFO2740E1ZQ	HR14A0011930				

Additional Place Of Business

CONTACT NAME	CONTACT NO	EMAIL	OFFICE ADDRESS	COUNTRY	STATE	CITY	GST NO	GST CERTIFICATE ATTACHMENT
Ali	9999105091	info@orchidisplay.co	495, HSIIDC PHASE-IV, SECTOR-57, KUNDLI, TEHSIL RAI,	India	Haryana	sonipat		

Product & services proposed to be provided by the Supplier

Sr. No	HSN/SAC Code	Description of Goods/ Services
1	69120020	Buffetware & tableware products

Legal Entity

Public Ltd Company Pvt Ltd Company Partnership Firm Proprietor Individual Trust LLP HUF AOP

Agreed Payment Terms (In Days)

30 Days 45 Days 60 Days 90 Days Other : 100% ADVANCE

Category And Sub Category Data

Sr. No	Category	Sub Category
1		

Registration to be done for entity

SELECT	ENTITY NAME	ENTITY WISE SUPPLIRE CODE
<input type="checkbox"/>	BLR LOUNGE SERVICES PRIVATE LIMITED	
<input type="checkbox"/>	MUMBAI AIRPORT LOUNGE SERVICES PRIVATE LIMITED	
<input type="checkbox"/>	TRAVEL FOOD SERVICES CHENNAI PRIVATE LIMITED	
<input type="checkbox"/>	TRAVEL FOOD SERVICES KOLKATA PRIVATE LIMITED	
<input type="checkbox"/>	TRAVEL FOOD SERVICES PRIVATE LIMITED	
<input type="checkbox"/>	TFS (R&R Works) Private Limited	
<input type="checkbox"/>	Semolina Kitchens Private Limited	
<input type="checkbox"/>	TRAVEL RETAIL SERVICES PRIVATE LIMITED	
<input type="checkbox"/>	THE IRISH HOUSE FOOD AND BEVERAGE PVT LTD	
<input type="checkbox"/>	Deluxe Caterers Pvt. Ltd.	
<input checked="" type="checkbox"/>	KAPCO BANQUETS AND CATERING PVT LTD	
<input type="checkbox"/>	Travel Food Services (Terminal-3) Pvt. Ltd.	
<input type="checkbox"/>	GMR HOSPITALITY LIMITED	
<input type="checkbox"/>	QMT LIFESTYLE AND TECHNOLOGY SERVICES PRIVATE LIMITED	

Documents to be submitted

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

Source Of Information

Source Of Information

Supplier

Is All Block

Is Payment Block

Additional Information

Legal Entity	<input checked="" type="checkbox"/> Partnership Firm
Permanent Account Number (PAN)	AABFO2740E
GST Number (GSTN)	06AABFO2740E1ZQ
MSME (UDYAM REGISTRATION NUMBER)	HR14A0011930
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

MR MUMKESH CHOPRA

Signature of Supplier

ORCHID

Stamp

25/09/2024

Date

For Internal use

Request Department

Name Santosh Sawant

Santosh Sawant

Signature

26/09/2024

Date

Approving Manager

Name

Signature

Date