## Supplier Master Form

## General information about the Supplier

Supplier Type				Department Responsible				
Name of Supplier	PLAN	PLANT PEOPLE			Name of Contact Person	ANGUD BHALLA		
Supplier Address	E-701, POOJA ENCLAVE, GANESH NAGAR, KANDIVALI WEST, MUMBAI 400067			Corporate Identification Number (CIN)	NA			
Country	India				State	Maharashtra		
City	Mumb	pai			Postal Code	400067		
Currency	Indian	Rupee			Landline Number	8779782090		
Email Address	anguc	lbhalla@plantpeople.in						
Email - Business/ Op's Tea	ım	angudbhalla@plantpeople.in	Name	Angud		Mobile Number	8779782090	
Email - Accounts Departme	en	angudbhalla@plantpeople.in	Name	Angud		Mobile Number	8779782090	
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		
PLANT PEOPLE	HDFC	59200020081983	HDFC0008704	8704	NA		

Statutory Details									
PERMANENT ACCOUNT NUMBER (PAN)	GST NUMBER (GSTN)	REGISTRATION	LOWER TDS CERTIFICATES U/S. 197 (IF APPLICABLE)	VAT TIN NUMBER (IF APPLICABLE)	FSSAI NUMBER (IF APPLICABLE)	PF & ESIC REGISTRATION NUMBER (IF APPLICABLE)			
AKSPA9675M	27AKSPA9675M1Z8	UDYAM-MH-19-0205599							

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

	Product & services proposed to be provided by the Supplier					
Sr. No	HSN/SAC Code	Description of Goods/ Services				
1	060290	PLANTS (ADDITIONAL HSN APPLICABLE FOR ASSOCIATED SERVICES LIKE LABOUR, TRANSPORT, SOIL ETC. AS AND WHEN APPLCIABLE)				

Legal Entity										
O Public	c Ltd Company	O Pvt Ltd Company	O Partnership Firm	۲	Proprietor Individual	0	Trust	O LLP	O HUF	O AOP
Agreed Payment Terms (In Days)										
🔵 30 Da	iys O	45 Days	60 Days	90 Day	vs <ul> <li>Other</li> </ul>			MENT PRIOR		GE, BALANCE 20%
Category And Sub Category Data										
Sr. No	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				
$\checkmark$	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	Is All Block			
		Is Payment Block			

Additional Information					
Legal Entity	Proprietor Individual				
Permanent Account Number (PAN)	AKSPA9675M				
GST Number (GSTN)	27AKSPA9675M1Z8				
MSME (UDYAM REGISTRATION NUMBER)	UDYAM-MH-19-0205599				
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							
ANGUD BHALLA	PLANT PEOPLE	26/09/2024					
Signature of Supplier	Stamp	Date					
For Internal use							
Request Department							
	Sonali Dhadve	26/09/2024					
Name Sonali Dhadve	Signature	Date					
Approving Manager							
Name	Signature	Date					