Supplier Master Form

General information about the Supplier

Supplier Type			Department Responsible		
Name of Supplier	PALAK ENTERPRISES		Name of Contact Person	MUKESH PAREEK	
Supplier Address	SHOP NO 10 AND 11, BALAJI ARCADE, NEAR RELIANCE PETROL PUMP,MALVIY,	A NAGAR,	Corporate Identification Number (CIN)	NA	
Country	India		State	Rajasthan	
City	JAIPUR		Postal Code	302017	
Currency	Indian Rupee		Landline Number	8708517579	
Email Address	Kamleshnotani125@gmail.com				
Email - Business/ Op's Tea	m MUKESHPAREEKGH1987@GM AIL.COM	Name	MUKESH PAREEK	Mobile Number	7426004843
Email - Accounts Departmo	n MUKESHPAREEKGH1987@GM AIL.COM	Name	MUKESH PAREEK	Mobile Number	7426004843
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
MUKESH PAREEK	BANK OF BARODA	31470200000857	BARB0JAGJAI	JAGJAI	BARBINBBJAI

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)	
DHTPP2502P	08DHTPP2502P1ZM	UDYAM-RJ-17-0235462			12221027000877		

	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	21050000	ICECREAM		

				l	_egal Entity				
O Public Ltd Co	ompany	Pvt Ltd Company	O Partnership Firm	۲	Proprietor Individual	🔿 Trust	O LLP	O HUF	
Agreed Payment Terms (In Days)									
) 30 Days	0 45	Days O 6	0 Days	90 Day	s Othe	er:			

Category And Sub Category Data			
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		
V	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	Buyer	Is All Block		
		Is Payment Block		

Additional Information				
Legal Entity	Proprietor Individual			
Permanent Account Number (PAN)	DHTPP2502P			
GST Number (GSTN)	08DHTPP2502P1ZM			
MSME (UDYAM REGISTRATION NUMBER)	UDYAM-RJ-17-0235462			
Lower TDS Certificates u/s. 197				
VAT TIN Number				
FSSAI Number	12221027000877			
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					
MUKESH PAREEK	PALAK ENTERPRISES	04/10/2024			
Signature of Supplier	Stamp	Date			
For Internal use					
Request Department					
	Hitesh Parmar	04/10/2024			
Name Hitesh Parmar	Signature	Date			
Approving Manager					
Name	Signature	Date			