## **Supplier Master Form**

## General information about the Supplier

Supplier Type Department Responsible

Name of Supplier DEEPAK PRINTARY Name of Contact Person MITRANG RAKESHBHAI RAWAT

Supplier Address 141-153 DEEPAK PRINTARY, Corporate Identification 0001

OPP NEHRUNAGAR SOC., NR. SUKHRAMNAGAR Number (CIN) WATER TANK,

Country RAKHIYAL, GOMTIPUR, AHMEDABAD State Gujarat

City Ahmadabad Postal Code 380024

CurrencyIndian RupeeLandline Number9725936263

Email Address deepakprintary@gmail.com

Email - Business/ Op's Team deepakprintary@gmail.com Name Mitrang Rawat Mobile Number 9725936263

Email - Accounts Departmen deepakprintary@gmail.com Name Mitrang Rawat Mobile Number 9725936263

Email - CFO deepakprintary@gmail.com Name Mitrang Rawat Mobile Number 9725936263

Email - CEO Or Director deepakprintary@gmail.com Name Mitrang Rawat Mobile Number 9725936263

Bank Details					
Beneficiary Name	Bank Name	Bank Account No.	IFSC Code	Bank Branch Code	Swift Code
DEEPAK PRINTARY	BANK OF BARODA	03320200001139	BARB0MANINA	0001	001

Statutory Details							
		MSME (UDYAM REGISTRATION NUMBER)		VAT TIN NUMBER (IF APPLICABLE)	FSSAI NUMBER (IF APPLICABLE)	PF & ESIC REGISTRATION NUMBER (IF APPLICABLE)	
AANFD1274E	24AANFD1274E1ZO	GJ01A0038852					

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>	HSN/S	SAC Code	Description of Good	ls/ Services					
	•								
					Legal Entity	,			
O Public	O Public Ltd Company O Pvt Ltd Company Partnership Firm O Proprietor Individual O Trust O LLP O HUF O 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					
	TRAVEL FOOD SERVICES PRIVATE LIMITED					
	TFS (R&R Works) Private Limited					
<b>✓</b>	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 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	d 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		Partnership Firm				
Permanent Account Number (PAN)		AANFD1274E				
GST Number (GSTN)		24AANFD1274E1ZO				
MSME (UDYAM REGISTRATION NUMBER)		GJ01A0038852				
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					
MITRANG RAKESHBHAI RAWAT	DEEPAK PRINTARY	07/10/2024			
Signature of Supplier	Stamp	Date			
For Internal use					
Request Department					
	Bhavesh Patel	07/10/2024			
Name Bhavesh Patel	Signature	Date			
Approving Manager					
Name	Signature	Date			