Supplier Master Form

General information about the Supplier

Supplier Type Department Responsible

Name of Supplier SNACK FACTORY PRIVATE LIMITED Name of Contact Person DEEPTI

Supplier Address NO 18,4TH FLOOR, GOVIND MOHALA VILLAGE Corporate Identification U15490TN2020PTC133573

HAIDERPU, SHALIMAR BAGH POORVI, NEW DELHI. Number (CIN)

Country India State Delhi

City NEW DELHI Postal Code 110088

CurrencyIndian RupeeLandline Number7401276398

Email Address deepti@topnut.in

Email - Business/ Op's Team tejasvi@topnut.in Name MS.TEJASVI Mobile Number 7401276398

Email - Accounts Departmen mahesh@bluejaynuts.com Name Mr.Mahesh Mobile Number 8974804878

Email - CFO tulasikiran@bluejaynuts.com Name Mr. Tulasi Kiran Mobile Number 8974804878

Email - CEO Or Director hemanth@topnut.in Name Mr. Hemanth Mobile Number 7401276398

Bank Details							
Beneficiary Name	Bank Name	Bank Account No.	IFSC Code	Bank Branch Code	Swift Code		
SNACK FACTORY PRIVATE LIMTED	AXIS BANK	919020080885154	UTIB0000676	676	AXISINBB676		

	Statutory Details									
	(GSTN)	REGISTRATION		_	(IF APPLICABLE)	PF & ESIC REGISTRATION NUMBER (IF APPLICABLE)				
ABDCS1838H	07ABDCS1838H1ZB	UDYAM-AP-02-0000815	NA	NA	10020044001986	ESI-79000720470000009 EPF				

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

	Type of Business with K-Corp proposed to be provided by the Supplier					
Sr. No	HSN/SAC Code	Description of Goods/ Services				
1	80132	CASHEWS W240 100GMS				
2	80212	ALMONDS 100GMS				
3	80252	PISTACHIO 100GMS				
4	80620	RAISINS 100GMS				
5	20081910	DRY ROASTED CASHEWS 100GMS				
6	20081920	DRY ROASTED ALMONDS 100GMS				
7	20081910	PINK SALT CASHEWS 100GMS				
8	20081920	BLACK SALT ALMONDS 100GMS				
9	20081920	SMOKED BBQ ALMONDS 100GMS				
10	20081910	TRUFFLE CASHEWS 100GMS				
11	20081910	SIRACHA SESAME CASHEWS 180GMS				
12	20081910	ITALIAN HERB & PEPPER CASHEWS 180GMS				
13	20081920	CHAMAPION NUT MIX 180GMS				
14	20081920	TRUFFLE NUT MIX 180GMS				
15	20081920	VERY BERRY NUT MIX 180GMS				
16	20081920	SMOKED BBQ ALMONDS 180GMS				
17	20081910	PINK SALT CASHEWS 180GMS				
18	20081920	BLACK SALT ALMONDS 180GMS				
19	20081910	DRY ROASTED CASHEWS 180GMS				
20	20081920	DRY ROASTED ALMONDS 180GMS				
21	20081910	TRUFFLE CASHEWS 180GMS				
22	20089900	GIFT BOX - PACK OF 3				
23	20089900	GIFT BOX - PACK OF 4				

	Legal Entity										
O Publi	c Ltd Company	● F	Pvt Ltd Company	Partnership Firm	0	Proprietor Individual	○ Trust	O LLP	O HUF	О АОР	
	Agreed Payment Terms (In Days)										
○ 30 Da	ays 🔘	15 Days	O 60	Days	90 Day	Oth	ner:				
	Category And Sub Category Data										
Sr. No	Category			Sub Category							
1											

	Registration to be done for entity					
SELECT	ENTITY NAME	ENTITY WISE SUPPLIRE CODE				
	TRAVEL FOOD SERVICES LIMITED - BLR					
	MUMBAI AIRPORT LOUNGE SERVICES PRIVATE LIMITED					
	TRAVEL FOOD SERVICES LIMITED - TFSCPL					
	TRAVEL FOOD SERVICES LIMITED - TFSKPL					
	TRAVEL FOOD SERVICES LIMITED					
	TRAVEL FOOD SERVICES LIMITED - TFS HIGHWAY					
	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					
	TFS GURGAON AIRPORT SERVICES PRIVATE LIMITED					

	Documents to be submitted					
Status of submission	Documents to be submitted along with Supplier Master Form					
ightharpoons	Copy of PAN card					
✓	Copy of GST Certificate					
	Copy of VAT Certificate					
	Lower TDS Certificates u/s. 197					
✓	Valid MSME - Udyam Certificate					
\checkmark	Valid FSSAI Certificate					
	Copy of PF/ESIC registration Certificate					
✓	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					
\checkmark	CIN Number Registration Certificate					
	Document for Modification of Existing Record					
	1					

Source Of Information Supplier	Is All Block
	Is Payment Block
	Additional Information
Legal Entity	✓ Pvt Ltd Company
Permanent Account Number (PAN)	ABDCS1838H
GST Number (GSTN)	07ABDCS1838H1ZB
MSME (UDYAM REGISTRATION NUMBER)	UDYAM-AP-02-0000815
Lower TDS Certificates u/s. 197	NA NA
VAT TIN Number	NA NA
FSSAI Number	10020044001986
PF & ESIC registration Number	ESI-79000720470000009 EPF-GRCDP2091893000

Source Of Information

"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					
DEEPTI	SNACK FACTORY PRIVATE LIMITED	11/10/2024			
Signature of Supplier	Stamp	Date			
For Internal use					
Request Department					
	Sunil Ojha	05/12/2024			
Name Sunil Ojha	Signature	Date			
Approving Manager					
Name	Signature	Date			