Supplier Master Form

General information about the Supplier

Supplier Type					Department Responsible				
Name of Supplier	PARA	PARAS ELECTRONICS			Name of Contact Person	Μ	MANISHA		
Supplier Address	393, SIR MANGALDAS HOUSE, NAAZ CINEMA COMPOUND, LAMINGTON ROAD, MUMBAI - 400004			Corporate Identification Number (CIN)	0	0			
Country	India	India			State	М	Maharashtra		
City	MUM	MUMBAI			Postal Code	40	400004		
Currency	Indiar	Indian Rupee		Landline Number	22	2240049406			
Email Address	conta	ctus@paraselectronics.com							
Email - Business/ Op's Tea	ım	contactus@paraselectronics.com	Name	NAMAN S	НАН		Mobile Number	9819339400	
Email - Accounts Departme	en	admin@paraselectronics.com	Name	SHRUTI V	ICHARE		Mobile Number	9967595855	
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	
PARAS ELECTRONICS	INDUSIND BANK	201002364576	INDB0000001	400234002	INDBINBBXXX	

Statutory Details									
	GST NUMBER (GSTN)	REGISTRATION			FSSAI NUMBER (IF APPLICABLE)	PF & ESIC REGISTRATION NUMBER (IF APPLICABLE)			
AAAFP7789H	27AAAFP7789H1ZP	UDYAM-MH-19-0058257							

	Additional Place Of Business							
CONTACT NAME	CONTACT NO	EMAIL	OFFICE ADDRESS	COUNTRY	STATE	СІТҮ	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	9987	SERVICES					
2	8529	GOODS					

Legal Entity									
c Ltd Company	O Pvt Ltd Company	Partnership Firm	O Proprieto	or Individual	O Trust	O LLP	O HUF	О аор	
Agreed Payment Terms (In Days)									
ays O	45 Days	i0 Days	90 Days	Other	r:				
Category And Sub Category Data									
Sr. No Category Sub Category									
	ays O	ays () 45 Days () 6	Agree ays () 45 Days () 60 Days () Categ	c Ltd Company O Pvt Ltd Company O Partnership Firm O Proprieto Agreed Payment T ays O 45 Days O 60 Days O 90 Days Category And Sub	c Ltd Company O Pvt Ltd Company O Partnership Firm O Proprietor Individual Agreed Payment Terms (In Day ays O 45 Days O 60 Days O 90 Days O Othe Category And Sub Category D	c Ltd Company O Pvt Ltd Company Partnership Firm O Proprietor Individual O Trust Agreed Payment Terms (In Days) Ays 60 Days 90 Days O ther :	c Ltd Company O Pvt Ltd Company Partnership Firm O Proprietor Individual Trust LLP Agreed Payment Terms (In Days) Ays O 45 Days O 60 Days O 90 Days O Other : Category And Sub Category Data	c Ltd Company O Pvt Ltd Company Partnership Firm O Proprietor Individual O Trust O LLP O HUF Agreed Payment Terms (In Days) Ays O 45 Days O 60 Days O 90 Days O ther : Category And Sub Category Data	c Ltd Company O Pvt Ltd Company O Partnership Firm O Proprietor Individual O Trust O LLP O HUF O AOP Agreed Payment Terms (In Days) ays 0 45 Days 0 60 Days 90 Days O Other : Category And Sub Category Data

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			
	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	Partnership Firm				
Permanent Account Number (PAN)	AAAFP7789H				
GST Number (GSTN)	27AAAFP7789H1ZP				
MSME (UDYAM REGISTRATION NUMBER)	UDYAM-MH-19-0058257				
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							
MANISHA	PARAS ELECTRONICS	17/12/2024					
Signature of Supplier	Stamp	Date					
For Internal use							
Request Department							
	Harish Tirlotkar	17/12/2024					
Name Harish Tirlotkar	Signature	Date					
Approving Manager							
Name	Signature	Date					