Supplier Master Form

General information about the Supplier

Supplier Type Department Responsible

Name of Supplier LUCKY OFFICE SOLUTIONS Name of Contact Person MR LALJI PATEL

Supplier Address NO.52, GROUND FLOOR, VASANTHAPPA GARDEN, Corporate Identification NA

DOOPNAHALLI, INDIRANAGAR, HAL 2ND STAGE, Number (CIN)

BENGALURU, BENGALURU URBAN, KARANATAKA-

Country 560008 Karnataka

City BANGALORE Postal Code 560008

Currency Indian Rupee Landline Number 9738618909

Email Address luckyofficesolutions@gmail.com

Email - Business/ Op's Team luckyofficesolutions@gmail.com Name KISAN PATEL Mobile Number 7353973427

Email - Accounts Departmen luckyofficesolutions@gmail.com Name LALJI PATEL Mobile Number 9738618909

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
LUCKY OFFICE SOLUTIONS	KOTAK MAHINDRA BANK	9738618909	KKBK0000429	000429	KKBKINBB

Statutory Details							
	GST NUMBER (GSTN)	- \-	LOWER TDS CERTIFICATES U/S. 197 (IF APPLICABLE)	VAT TIN NUMBER (IF APPLICABLE)	(IF APPLICABLE)	PF & ESIC REGISTRATION NUMBER (IF APPLICABLE)	
AXPPC2532D	29AXPPC2532D1ZO	UDYAM-KR-03-0001672					

Additional Place Of Business										
CONTA		CONTACT NO	EMAIL	OFFICE ADDRESS	COUNTRY	STATE	CITY	GST NO	GST CERTIFICATE ATTACHMENT	
			Type of	Business with K-Co	orp proposed	to be provided	by the Suppl	ier		
Sr. No										
1	7613	<u> </u>								
2	4823		FOOD PACKING CONTAINER PAPER MATERIAL, Butter Paper cover, Etc							
3	4421		wooden sticks, satay sticks, wooden spoon, wooden fork spoon etc.							
4	3923		Plastic food packi	Plastic food packing container, plstic box, plsatic Items Etc						
5	4818		TISSUE PAPER, TISSUE ROLL, UITILITY ROLL, MULTI FOLD TISSUE, C FOLD, L FOLD TISSUE, CUBE TISSUE,							
Legal Entity										
O Public	Ltd Com _l	pany C	Pvt Ltd Company	O Partnership Firm	Proprietor Inc.	lividual 🔘 Tr	rust 🔘 LLP	O HUF	O AOP	
Agreed Payment Terms (In Days)										
Other: 15 DAYS										
Category And Sub Category Data										
Sr. No	Category	,		Sub Category						

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 PAN card						
\checkmark	Copy of GST Cert	Copy of GST Certificate						
	Copy of VAT Certif	ificate						
	Lower TDS Certific	icates u/s. 197						
\checkmark	Valid MSME - Udy	yam Certificate						
	Valid FSSAI Certif	Valid FSSAl 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							
	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)		AXPPC2532D						
GST Number (GSTN)		29AXPPC2532D1ZO						
MSME (UDYAM REGISTRATION NUMBER)		UDYAM-KR-03-0001672						
Lower TDS Certificates u/s. 1	197							
VAT TIN Number								
FSSAI Number								
PF & ESIC registration Numb	oer							

"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							
MR LALJI PATEL	LUCKY OFFICE SOLUTIONS	19/12/2024					
Signature of Supplier	Stamp	Date					
For Internal use							
Request Department							
	VIJAYAKUMAR	20/12/2024					
Name VIJAYAKUMAR	Signature	Date					
Approving Manager							
Name	Signature	Date					