

Vendor Registration Form

please provide the informations for better services

Name of the Organization	
Name of the Proprietor/Promoter/Director	
Registration No.	

Address	
Street 1	
Street 2	
City	
State	
Specify Country (If out side India)	
Pincode	
Phone	
Fax	
Email / Website	
Name of contact person	
Phone No. of Contact Person	
Type of supplier	
Details of the items/services provided	

Years of establishment	
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Turnover during last 3 year	Turnover
Year Turnover	
11-12	
10-11	
09-10	

Major Customers. Please specify.(Attach List)	
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Quality Assurance Certificate	
ISO	
Others	

Dealt with ALANKIT since	
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Name of Bank	
Address of Bank	
City/State/Pin	
Account No.	
Type of A/C	
IFSC/RTGS/NEFT Code	

PAN	
Service Tax Registration no.*	
CST/VAT Registration no.*	
EXCISE Registration no.*	
Specify your ESI Code.*	
Specify your PF Code.*	

Has your company ever been involved in Fraudulent activities.

Does any of your relative work in Alankit? Please specify.	
Name	
Designation	
Department	
Relationship	

*Please attach a scanned copy of related documents & cancelled cheque

