

Vendor Registration No:	
Date:	

	Vendor Registration	on Form
Vendor Information		
Company Name		
Type Of Organization	Single Proprietorship	Partnership Corporation
Nature Of Business		
Company Registration I	Number	Tin Number
ID Card Number		
Bank Account Name		
Bank Account Number		
Company Address / Co	ntact Details	
Address		Postal Code
Country		City
Tel	Fax	Mobile
Email		
Contact Person		
Designation		
Tel		
Mobile		
	mation above are true and correct	
lame		Stamp
Designation		
ignature		
ate		
pproved By (HOD Proc	urement)	
	urement)	
pproved By (HOD Proc	urement)	

 $<sup>{}^*</sup>$  Submit a copy of Company Registration/Business Registration, GST Certificate & ID Card Copy (If it's an individual) along with the form