

AKG EXIM LIMITED

REGD. OFF.: 408-411, 04TH FLOOR, PEARLS CORPORATE, MANGALAM PLACE, SECTOR-3, ROHINI, DELHI-110085

Tel. No.: +91-11-40015500, Fax: +91-11-40015518, E-Mail Id: Info@akg-global.com, akgekim06@gmail.com

CIN: L00063DL2005PLC139045, PAN: AAFCA3089D, GSTIN: 07AAFCA3089D1ZU

Vendor Registration Form**Company Details**

Vendor Code :

Name of the Vendor:

Address :-

Country Code	STD Code	Nos.	E - Mail:	<input type="text"/>
Tele No. (O): <input type="text"/>	<input type="text"/>	<input type="text"/>		
Fax No.(O): <input type="text"/>	<input type="text"/>	<input type="text"/>	Web Site:	<input type="text"/>
Mobile No. (O): <input type="text"/>	<input type="text"/>			

Name & Designation of Principal Officers/Persons to be contacted

No.	Name of the Person	Designation	Qualification	Contact No.	Place
1					
2					

Nature of Business (Please Tick any One)

<input type="checkbox"/>	Manufacturing	<input type="checkbox"/>	Sole Selling Agent	<input type="checkbox"/>	Dealer	<input type="checkbox"/>	Trader
<input type="checkbox"/>	Agent	<input type="checkbox"/>	Assembler				

Nature of Vendor (Please Tick any One)

<input type="checkbox"/>	Proprietary	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Private Ltd.	<input type="checkbox"/>	Public Ltd.	<input type="checkbox"/>	LLP
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Year of establishment: Values of Investment in Plant & Machinery: Rs. LacsSize of the company Enterprise Registration No. Date: PAN No.: Date GSTIN: Date MSME Reg. No. Date Trade License No. Date Factory License No. Date **ISO / ISI / Other certification**Are you registered with ISO/ISI/Other? Yes No

If Yes, please enclose the copy of the certificate

If No, whether you are in process to acquire? Yes NoIf Yes, expected date of receipt of such certification: **Factory / Offices Details**

No. of Factories:							No. of Offices:			
No.	Address of Factories / Offices	State	Phone No.	Fax No.	Mobile No.	E - Mail				
1										
2										

Name of the Items Produced/Products/Processed /Services provided:-

Financial Details of Last Three Years (Rs. In Lacs)

No.	Year	Production	Annual Turn Over

List of Five Main Clients

No.	Name & Address of the Company	Contact Person & Designation	Phone. No	Fax No.	Product Supplied	Value of supplies during last 3 years		

Miscellaneous Data

Total No. of Employees including HO, Factories, QC Lab., Sister Concern, etc.:

Address of the Branch Offices in India

No.	Address of Branch Office	Phone No.	Fax No.	Contact Person

Bank Details

Name & Address of Banker 1 :

Bank Account No :

RTGS No. :

Name & Address of Banker 2 :

Bank Account No :

RTGS No. :

Whether any of your relative is working with us: (If Yes, please provide details)

No

DECLARATION

The above information is true in all respects and we undertake to inform you if any change in the above particulars regarding our business from time to time.

For XYZ Ltd.

Place :

Date :

Signature of Authorised Signatory / Representative

Note: Kindly Attach Copy of Documents with this Form and submit through E-Mail or Hard Copy by hand or courier at address of the Company.