Jii	ndal Aluminium Limited, Bangalore.	CUSTOMER REGISTRATION FORM		Marketing Department	
1	Customer Name		3GENERATIO	ONS	
			A-39, Hosiery Complex,		
2	Address with PIN Code		Phase II,Noida -201305 (U.P.)		
8	Name of Contact Persons (2 Nos.) with Contact Nos.		MAYANK UPADHYAY (9599916194)		
3			NAVEEN SEHGAL (9312431014)		
4	Telephone No (With STD/ ISD code)		01203513510	01203513510	
5	What's App No (With ISD code if outside India)		9599916194		
6	Email ID		purchasenew3g@3generations.in		
7	Location - City / State / Zone		Noida (U.P)	Noida (U.P)	
8	Customer Types: a. Govt. Company b. PSU c. OEM d. Fabricator e. Contractor f. Trader				
9	Other Information - Sis Concern Company etc.				
10	Bank Details		ATTACHED		
	Name of the Bank		ATTACHED		
7.	Branch				
	A/c No. With copy of Cancelled cheque		ATTACHED		
	IFSC Code				
	Bank Contact Detail - Email / Phone No.			•	
11	GST No Provide copy of GST Regis	stration Certificate	ertificate ATTACHED		
12	PAN No. Provide copy of PAN		AAAFZ6568L		
Date:22.12.2020 Place:Noida			Signature of Customer's Authorized Person with Company Seal		

Jindal Aluminium Limited, Bangalore. CUSTOMER REGISTRA		CUSTOMER REGISTRATIO	N FORM	Marketing Department
1	PAYMENT INFORMATION: Payment Terms (need drop down menu such as advance payment (30:70 or 100 % before dispatch) credit period, credit through Clean, LC, BG etc.) Credit Limit Additional Credit Limit			
2	Bank Guarantee – Details: (If applicable, the below fields are mandatory)			
	Validity Expiry Date			
	Amount			
3	Black Listed			
10	TECHNICAL INFORMATION: - To be filled by the Marketing Back office at the time of making AO			
	End Application - Actual End Application of Product - Door, Window, Pump Body, Pneumatic etc.			
	Industries - 12 Category (Building & Cons, Automobile, Transmission & Distribution, Electrical & Electronic, Defence, Medical, Automation, Solar, AHU, Modular, Textile & Defence			
	Aesthetic Requirement - Selection (Powder Coating / Anodising / PVDF / Achromatizing			
	Special Tolerance Requirement			
	Special Packing Requirement			
	Special Remarks.			
	gistration done by apployee Name:			
Date:			Sign	ature of the Employee.