Jindal Aluminium Limited, Bangalore.		CUSTOMER REGISTRATION FORM		Marketing Department
1	Customer Name		AVINASH INDUSTRIES	
2	Address with PIN Code		F-10 A Riico Industrial Area Hindaun city – 322230 (Dist. Karauli) Rajasthan	
3	Name of Contact Persons (2 Nos.) withContact Nos.		MR. Manoj Kumar Gupta Mobile No. 9413379902 MR. Avinash Agarwal Mobile No. 7597229203	
4	Telephone No (WithSTD/ ISD code)		NIL	
5	What's App No(With ISD code if outside India)		NIL	
6	Email ID		Avinashindustries2019@gmail.com	
7	Location - City / State / Zone		Hindaun City / Rajasthan	
8	Customer Types:  a. Govt. Company b. PSU c. OEM d. Fabricator e. Contractor f. Trader		NIL	
9	Other Information - Sis Concern Company etc.		NIL	
10	Bank Details			
	Name of the Bank		BANK OF BARODA	
	Branch		HINDAUN CITY	
	A/c No. With copy of Cancelled cheque		07000500012697	
	IFSC Code		BARBOHINDAU	
	Bank Contact Detail - Email / Phone No.			
11			08ABBPG3	823H1ZZ
12	PAN No. Provide copy of PAN		ABBPG382	
Date: 18-08-2020 Place: HINDAUN CITY			ForAVINASH INDUSTRIES  Signature of Customer's Authorized  Person with Company Seal	

Jindal Aluminium Limited, Bangalore.  CUSTOMER REGISTRAT		TION 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.)		30% - Advance Payment & 70% Before Despch	
	Credit Limit		NIL	
	Additional Credit Limit		NIL	
2	Bank Guarantee – Details:(If applicable, the below fields are mandatory)			
	Validity		NIL	
	Expiry Date		NIL	
	Amount		NIL	
3	Black Listed		NIL	
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		NIL	
			NIL	
			NIL	
	Aesthetic Requirement - Se Anodising / PVDF / Achrom		NIL	
	Special Tolerance Requiren	nent	NIL	
	Special Packing Requireme	nt	NIL	
	Special Remarks.		NIL	
	gistration done by ployee Name:			
Date:			Signature of the Employee.	