Jindal Aluminium Limited, Bangalore.		CUSTOMER REGISTRATION FORM		Marketing Department
1	Customer Name		Eckhardt Steel & Alloys	
2	Address with PIN Code		Head Office : 12A Gr Flr., D Wing, Shreepati Castle, 11th Khetwadi Lane, Mumbai 400 004, Maharashtra India. Delivery location : Eckhardt Steel & Alloys Plot no 1187, Road No: 13 Kalamboli Steel Market, Kalamboli, Navi Mumbai 410218	
3	Name of Contact Persons (2 Nos.) with Contact Nos.		Kalpesh Shah +91 98331 28008	
0			Satish Shah +91 98330 43200	
4	Telephone No (With STD/ ISD code)		+91 22 23850000 / +91 22 66518605	
5	What's App No (With ISD code if outside India)		+91 98331 28008	
6	Email ID		esa@esteel.co.in	
7	Location - City / State / Zone		Mumbai	
8	Customer Types : a. Govt. Company b. PSU c. OEM d. Fabricator e. Contractor f. Trader		Trader	
9	Other Information - Sis Cond	cern Company etc.	No	
10	Bank Details			
-	Name of the Bank		Kotak Mahindra Bank	
	Branch		Fort Branch	
	A/c No. With copy of Cancel	led cheque	6650440013	60
	IFSC Code		KKBK00009	57
	Bank Contact Detail - Email	/ Phone No.	+91 22 2263	80376/77
11	GST No Provide copy of GST Regist	ration Certificate	27AABFE83	34N1Z3
12	PAN No. Provide copy of PAN		AABFE8334	
Date: Place:			PA Signature	ATTIC ALLOYS

Jindal Aluminium Limited, Bangalore.		CUSTOMER REGISTRATION 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.)		30:70	
	Credit Limit			
	Additional Credit Limit			
2	Bank Guarantee – Details: fields are mandatory)	(If applicable, the below		
	Validity			
	Expiry Date			
	Amount			
3	Black Listed			
10	TECHNICAL INFORMATION: -			
		cation - Actual End Application of Product - dow, Pump Body, Pneumatic etc.		
	Industries - 12 Category (Building & Cons, Automobile, Transmission & Distribution, Electrical & Electronic, Defence, Medical, Automation, Solar, AHU, Modular, Textile & Defence			
	Aesthetic Requirement - Sel Anodising / PVDF / Achroma			
	Special Tolerance Requirem	ient		
	Special Packing Requirement	nt		
	Special Remarks.			
	jistration done by ployee Name:			
Date:			Signat	ture of the Employee.