Jindal Aluminium Limited, Bangalore.		CUSTOMER REGISTRATION FORM		Marketing Department
1	Customer Name		Galaxy India	
2	Address with PIN Code		GALAXY INDIA Near Global Industrial Park,Village Mauli,Barwala,Distt Panchkula,Haryana,Pincode-134118+91	
3	Name of Contact Persons (2 Nos.) with Contact Nos.		Dheeraj jain 9816662514 Dheeraj jain 8847687564	
4	Telephone No (With STD/ ISD code)			
5	What's App No (With ISD code if outside India)		9816662514	
6	Email ID		galaxyindiadj@gmail.com	
7	Location - City / State / Zone		Village mauli, Barwala distt, panchkula, harvana	
8	Customer Types : a. Govt. Company b. PSU c. OEM d. Fabricator e. Contractor f. Trader		OEM	
9	Other Information - Sis Concern Company etc.			
10	Bank Details			
	Name of the Bank		HDFC	
	Branch		Sector 8 chandigarh	
	A/c No. With copy of Cancelled cheque		50200057392593	
	IFSC Code		HDFC000010)7
	Bank Contact Detail - Email	/ Phone No.		
11	GST No Provide copy of GST Regist	ration Certificate	06AFOPJ5370D1ZH	
12	PAN No. Provide copy of PAN		AFOPJ5370D	
Date:				
Place:			Signature of Customer's Authorized Person with Company Seal	

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.)			
	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: - 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 - Sel Anodising / PVDF / Achroma			
	Special Tolerance Requirem	nent		
	Special Packing Requirement	nt		
	Special Remarks.			
Registration done by Employee Name:				
Date:			Signat	ure of the Employee.