Jindal Aluminium Limited, Bangalore.		TRATION FORM	Marketing Department		
1	Customer Name		LOUVERLINE BLINDS PVT LTD- L00300		
2	Address with PIN Code		NO 43/2 SINGASANDRA,ELECTRONIC CITY POST BANGALORE,KARNATAKA,560100		
3	Name of Contact Persons (2 Nos.) with Contact Nos.		HEMANTH		
			9845036064		
4	Telephone No (With STD/ ISD code)				
5	What's App No (With ISD code if outside India)				
6	Email ID		hemant@louverlineblinds.com		
7	Location - City / State / Zone		Bengaluru		
8	Customer Types : a. Govt. Comp. b. PSU c. OEM d. Fabricator e. Contractor f. Trader	any			
9	Other Information - Sis Concern				
10	Bank Details				
	Name of the Bank				
	Branch				
	A/c No. With copy o	f Cancelled cheque			
	IFSC Code				
	Bank Contact Detai	I - Email / Phone No.			
11	GST No Provide copy of GS	T Registration	29AADCL1638B1ZS	5	
12	PAN No. Provide copy of PAI	N	AADCL1638B		
Date:07/07/2020 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 advance payment (30:70 or credit period, credit through	100 % before dispatch)		
	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 INFORMATIO Marketing Back office at th	· · · · · · · · · · · · · · · · · · ·		
	End Application - Actual End Door, Window, Pump Body,			
	Industries - 12 Category (Bu Automobile, Transmission & Electronic, Defence, Medica Modular, Textile & Defence	Distribution, Electrical &		
	Aesthetic Requirement - Sel Anodising / PVDF / Achroma	· · · · · · · · · · · · · · · · · · ·		
	Special Tolerance Requirem	nent		
	Special Packing Requirement	nt		
	Special Remarks.			
Registration done by Employee Name: Date: 11/07/2020			Signat	ture of the Employee.