Jindal Aluminium Limited, Bangalore.		CUSTOMER REGISTRATION FORM		Marketing Department
1	Customer Name		Shubham Steel Indore	
2	Address with PIN Code		336, A-2, Scheme No. 136, Niranjanpur, Indore-452010 (M.P.)	
3	Name of Contact Persons (2 Nos.) with Contact Nos.		Mr. Mandeep Pal : 9131335843	
			Mr. Ravi Pure : 9754733964	
4	Telephone No (With STD/ ISD code)			
5	What's App No (With ISD code if outside India)		7828546806	
6	Email ID		Indore.shubhamsteel@gmail.com	
7	Location - City / State / Zone		Indore/M.P./Central India	
8	Customer Types: a. Govt. Company b. PSU c. OEM d. Fabricator e. Contractor f. Trader		Trader	
9	Other Information - Sis Concern Company etc.		R.M. Industries/ Dhanlaxmi Spring	
10	Bank Details		I I I I I I I I I I I I I I I I I I I	
	Name of the Bank		Central bank of India	
	Branch		Sanmati School Branch	
	A/c No. With copy of Cancelled cheque		3786169813	
	IFSC Code		CBIN028396	1
	Bank Contact Detail - Email	/ Phone No.	8839334542	
11	GST No Provide copy of GST Regist	ration Certificate	23DCIPP2316D1Z0	
12	PAN No. Provide copy of PAN		DCIPP2316D	
Date: 01.10.2020 Place: Indore				a subhage

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: -			
	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	ture of the Employee.	