


Jindal Aluminium Limited, Bangalore.		<u>CUSTOMER REGISTRATION FORM</u>	Marketing Department
1	Customer Name	Siemens Limited	
2	Address with PIN Code	Siemens Ltd. E-76 Waluj MIDC Area Aurangabad 431133, India	
3	Name of Contact Persons (2 Nos.) with Contact Nos.	Ganesh Nikam	
		Chatakonda, Ravi Venkata Sai	
4	Telephone No (With STD/ ISD code)	+91 240 3985362	
5	What's App No (With ISD code if outside India)		
6	Email ID	ravi.chatakonda@siemens.com	
7	Location - City / State / Zone	Aurangabad	
8	Customer Types :	OEM	
	a. Govt. Company		
	b. PSU		
	c. OEM		
	d. Fabricator		
	e. Contractor		
f. Trader			
9	Other Information - Sis Concern Company etc.	-	
10	Bank Details		
	Name of the Bank	Deutsche Bank	
	Branch	Mumbai	
	A/c No. With copy of Cancelled cheque	0000786000	
	IFSC Code	DEUT0784BBY	
	Bank Contact Detail - Email / Phone No.	022-71804999	
11	GST No Provide copy of GST Registration Certificate	27AAACS0764L1Z6	
12	PAN No. Provide copy of PAN	AAACS0764L	
Date: 16/01/2021 Place: AURANGABAD, MAHARASHTRA		 Signature of Customer's Authorized Person with Company Seal	

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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.)	90 Days with LC	
	Credit Limit		
	Additional Credit Limit		
2	Bank Guarantee – Details: (If applicable, the below fields are mandatory)	Not Applicable	
	Validity		
	Expiry Date		
	Amount		
3	Black Listed		
10	TECHNICAL INFORMATION: - To be filled by the Marketing Back office at the time of making AO	All details mentioned in Technical Data Sheet	
	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 - Selection (Powder Coating / Anodising / PVDF / Achromatizing		
	Special Tolerance Requirement		
	Special Packing Requirement		
	Special Remarks.		
Registration done by Employee Name:			
Date:			Signature of the Employee.