Jindal Aluminium Limited, Bangalore.		CUSTOMER REGISTRATION FORM		Marketing Department	
1	Customer Name		SIGNODE INDIA LTD		
2	Address with PIN Code		SIGNODE INDIA LIMITED, RUDRARAM VILLAGE, PATANCHERU MANDAL, SANGAREDDY TQ, SANGAREDDY DISTRICT, TELANGANA - 502329 India		
3	Name of Contact Persons (2 Nos.) with Contact Nos.		ROHIT PARMAR # 9328180307		
5			RAVI RAO #		
4	Telephone No (With STD/ ISD code)				
5	What's App No (With ISD code if outside India)		+919328180307		
6	Email ID		rohit.parmar@	rohit.parmar@signode.com	
7	Location - City / State / Zone		VILLAGE – RUDRARAM DISTRICT, TELANGANA - 502329		
8	Customer Types : a. Govt. Company b. PSU c. OEM d. Fabricator e. Contractor f. Trader		PSU		
9	Other Information - Sis Concern Company etc.				
10	D Bank Details				
	Name of the Bank		CITI BANK	CITI BANK	
	Branch		BEGUMPET		
	A/c No. With copy of Cancel	led cheque	0037217018		
	IFSC Code		CITI0000006		
	Bank Contact Detail - Email / Phone No.				
11	GST No Provide copy of GST Registration Certificate		36AAHCS8120M1Z0		
12	PAN No. Provide copy of PAN		AAHCS8120M		
Date: 16-09-2020 Place: RUDRARAM TELANGANA			ROHIT PARMAR 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: (If applicable, the below fields are mandatory)			
	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.