## **VENDOR REGISTRATION FORM**

To

Client Name: DruthvikClient

Client Address: 1620, 25th Cross, 27th Main Rd, Sector 2, HSR Layout, - 90800349

Client PAN No.: ZSQPI1993O



Account Number:	3243423432423423
IFSC Code:	212232323R3R
Bank Address:	sdadadsds
Documents Required (List of Attachments)	:
Vendor/Customer Registration Form	Vendor_Customer_Registration_Form.pdf
GST Registration Certificate	GST_Registration_Certificate.pdf
Declaration:	
	We hereby confirm and acknowledge that (i) bank details and other information provided by me to DruthvikClient having its address at 1620, 25th Cross, 27th Main Rd, Sector 2, HSR Layout, - 9080034971 (hereinafter "DruthvikClient") are true and correct and grant my consent to utilise the same for processing of payment or for any other lawful purposes in relation to my dealing with DruthvikClient(ii) I further authorise DruthvikClientto share Information with such other agency as may be necessary for processing of payments and for any other lawful purposes. I understand that in case I require details related to such agency I may write to DruthvikClient and request for such information (iii) I understand that I have provided Information voluntarily and have option to review modify information or withdraw my consent any time by writing to DruthvikClient(iv) I confirm that I am competent and duly authorised to provide this declaration.
	Authorised Signatory (Vendor) Sign & Stamp