	RITCOM SYSTEMS AND SERVICES PRIVATE LIMITED											
		Unit No 2, A	Aristocrate, Lajya C			l, Andheri(E	ast) Mum	bai 400069	Э.			•
			Customer Re	egistration	Form							
Company Name:-												
Registered Address:-												
											1	
									Pin co	ode:-		
Land Line No:-		<u> </u>			Tele Fax No:-							
Name of Finance Head:						-						
Email ID of F	inance Head:-						Mobil	e No:-				
			Shipping Addres		Godown	Address)						
		Billing Ade	dress / Office Address					Shipping Ad	dress / Godo	wn Address	S	
Add	dress											
Contact Person Name:-												
Contact Person Mobile												
Contact Person E-Mail I	D:-											
		•	Tax Regis	tration Det	:ails							
PAN CARD No:-							GST No:-					
MSME No:-						CIN No:-						
Type Of Company:-				Partnership:-			Pvt Ltd:-			Ltd:-		
Nature of Business:-		System Integrator:-			Reseller:-			Retailer:-			E-Retailer:-	
Office Space:-		Rented:-		Owne			0		fice Space:-			
		СОМР	PANY TURNOVER	•	T THREE Y	'EARS)						
Business Start Year:-			Net Worl					Equity/Capit			ļ	
Financial Year		Year 2022 - 2023	Year 2021 -	2022	Ye	ear 2020 - 202		No Of Emplo				
Value					No of Branches:-							
1		Pi	roprietor/ Partn	ers/ Direct	ors detail:	s:						
Name:-												
Residence Address:-												
E-Mail ID												
Mobile No:-												
			BANKER I	NFORMATI	ION							
Bank Name:-												
Bank Address:-												
Branch Name:-								No. of Sign	natories :-			
Account No:-					IFS	C / NEFT Cod	le:-					
Type of Account:-		Current:-			Cash Credit:-			Overdraft:-			Others:-	
Bank Limit:-					Cash Credit:-			Overdraft:-			Others:-	
		RF	FERENCE OF DI	STRIBUTOR	/ PARTIE	S						
Name:-		1			.,							
Address:-												
7.44.755												
Telephone No:-												
Contact Person:-												
Mobile No:-												
E-Mail ID:-												
Credit Period:-												
Credit Limit:-												
		List of	f Terms Of Trade Acceptan	ce to be signed fo	or SMOOTH BUSI	INESS						
1. For All the transactions P.C	D. is mandatory to clearly men	tioning the SKU,QUANTITY,Applicable GST and	Payment Terms.									,
2. All P.Os /Acknowledged cl	learly mentioning billing instru	ction by you will be binding upon you and und	er no circumstances any S.	ALES RETURN don	e.							,
3. Payment terms will be from	m date of billing. Any delay in F	Payment , interest will be applicable										
4.Finanace cost debit note pa	ayment has to be cleared with	in 15 days from the date of Debit note										
		ICL will not be deducted from regular payment	till CN is approved by VEN	IDOR/DISTRIBUTO	R							
-		eared along with Delay Interest										
		written, DCICL will have no role in the same a	nd not responsible for any	commitment by \	/ENDOR/DISTRIE	BUTOR						
		red at the time of placing the order.										
9. CDC payments to be made	against delivery OR along with		/n . /									
	ad Boo	Signature of Owner ,	/ Partner / Director.									
Signe	ed By:-											
		1										
Design	nation:-											
-			121	n.l						Comp	any Seal	
			Kindly Encl the	Relow Do	cument.							
	n Form duly filled & sign	ed										
2. GST Certificate (Form												
3. Pan Card of the Comp												
		ted Balance Sheet & Partnership Deed										
		oration, Memorandum of Association,	Articles of Associatio	n								
6. Bank Statement for last 3 Months												
7. Latest year Audited Balance Sheet / Financial 8. KYC document of Promoter / Director/ Partner / Proprietor (Driving License / Passport / Aadhar Card)												
	moter / Director/ Partne	r / Proprietor (Driving License / Passpo	ort / Aadhar Card)									
9. 2 Security Cheques.												
		For DC Infote	ech and Commu	nication Li	<u>mited</u> offi	<u>ice use o</u> n	ıly.					
Reference	e Person:-				Bran	nch:-						
Credit A	Amount:-				Credit	: Days:-						

Product:-		Date:-							
Authorise By:-		Approved Amount:-							
Remark									