

CUSTOMER CREDIT APPLICATION FORM (CCAF)

BUSINESS INFORMATION

Company Name :

Shilpi Communication

GST No :

07AASPS9397N1Z8

Proprietor/Partners/Directors details :

PROPRIETOR

Business Type :

Sole proprietorship

Billing Address :

38/4 M.B Road Khanpur

City :

DELHI

State :

Delhi

Zip Code :

110080

Registered Company Address :

38/4 M.B Road Khanpur

City :

DELHI

State :

DELHI

Zip Code :

110080

E-mail | Fax :

hsf604@gmail.com

Credit Requested :

300000

Date business commenced :

2009-01-04

Nature of Business :

RETAIL

BANK INFORMATION

Account Name :

SHILPI COMMUNICATION

Account Number :

608020110000143

Bank Name :

BANK OF INDIA

Branch :

DEOLI KHANPUR

Type of Account :

Email :

hsf604@gmail.com

IFSC Code :

BKID0006080

Phone :

9910326330

BUSINESS / TRADE REFERENCES

Company name :

SHILPI COMMUNICATION

Address :

38/4 M.B Road Khanpur

Nature of Business :

RETAIL

Phone :

9910326330

AGREEMENT

1. All invoices are to be paid 21 days from the date of the delivery
2. Claims arising from invoices must be made within seven working days.
3. Finance charge of 1.5% per month will be assessed on all balance outstanding past terms
4. By submitting this application, you authorize to make inquiries into the banking and business/trade references that you have supplied.

5. In case of cheque bounce, all bank charges should be borne by the customer along with penalty fee of INR 500 per cheque.

I HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS MENTIONED ABOVE AND HEREBY AGREES TO ABIDE BY THEM. BY COMPLETING AND RETURNING THIS APPLICATION TO ELECTRONICS BAZAAR. THE APPLICANT REPRESENTS THAT ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT. THE APPLICANT WILL ALSO AGREE TO NOTIFY ELECTRONICS BAZAAR OF ANY CHANGE IN COMPANY OWNERSHIP OR MANAGEMENT

SIGNATURES

Name and Title :

SANJEEV SIKRI

Date :

2018-03-26

(FOR OFFICIAL USE ONLY)

Sales Rep Name Employee Code :

Credit Limit :

Customer No :

Zone/State :

Approved By :

Date of Approval :