

Provisional Customer Registration Application(Under Approval)

Basic Information:

Registered Port: Chennai Port Authority Resident: Indian

Location: Customer Type: Shipping Agent

Identification Information:

GSTIN: 19AAACP1206G4ZR PAN: AAACP1206G

General Information:

Organization Name: t

Mobile Number (OTP): 888888888Email: deepbasakdmc@gmail.comCommunication Preference: MobileBranch/Department/Division:

Branch/Operational Communication Info:

Mobile Number: 88888888888 Email: deepbasakdmc@gmail.com

Address Information: (GSTIN/BILLING)

Address Lines: t

Country: India State: WEST BENGAL

District: BARDHAMAN **City**: Benachity

Post Code: 713213

Address Information(Branch/Operational):

Address Lines: t

Country: India State: WEST BENGAL

District: BARDHAMAN City: Benachity

Post Code: 713213

Agency Information:

Agency Code: t Agency License Number: t
Agency Validity From: 09/04/2024 Agency Validity To: 09/04/2024

Port Authority Reg.No: tt

Bank Information:



Bank Account No: 555555555555555555

Address Line 1: t
State: WEST BENGAL

City: Benachity

Bank Branch: s

Bank Name: sbi
Country: India

District: BARDHAMAN **Post Code**: 713213

IFSC Code: sbin0003905

Bank Guarantee Information:

Bank Guarantee Document Number	Bank Guarantee Name	Bank Guarantee From	Bank Guarantee To	Claimable Period
sbi001	sbi	20240417235959	20240426235959	20240419235959
sbi002	sbi	20240410235959	20240426235959	20240419235959

Contact Person Information:

Title	First Name	Last Name	Designation	Mobile	Email	PAN	Aadh
							aar
Mr	d	f	Admin	888888888	deepbasakdm	cdppb0022f	4444
			Executive		c@gmail.com		4444
							4444

Attachments: