		VENDOR PROFILE
1	NAME OF THE VENDOR / CONTRACTOR /	
	SUPPLIER / SERVICE PROVIDER ETC.	
2	POSTAL ADDRESS OF THE VENDOR / CONTRACTOR / SUPPLIER / SERVICE	
	PROVIDER ETC.	
		PIN-
		TEL. NO.(s) :
3	NAME & CONTACT DETAILS OF THE	122.110.(0)
	RESPONSIBLE PERSON / CONTACT PERSON	
		E-mail :
		Mobile No. : -
4	TYPE OF BUSINESS	Tel. No. :
	[Please tick in appropriate box]	SUPPLY WORKS SERVICE OTHERS (PL. SPECIFY)
5	ODCANIZATIONAL	
5	tick in appropriate Box]	PROPRIETORSHIP PARTNERSHIP COMPANY REGISTERED
6	STATUTORY INFORMATION	
J	[Please submit self-attested copy]	P A N :
	,	T I N :
		C S T
		ST REGD. No.:
7	PARTICULARS OF BANK ACCOUNT A. NAME OF THE BANK B. BRANCH OF THE BANK	ayment receipt through Electronic Clearning Service (NEFT/RTGS)
	C. ADDRESS OF THE BANK BRANCH	
	January Diamon	The final state of the state of
		PIN-
	D. BANK ACCOUNT NUMBER	
	(Enclose a cancelled cheque leaf) E. TYPE OF THE BANK ACCOUNT	
	[Please tick in appropriate box]	SD A /c
	F 9-Digit Bank Branch Code	SB A/c Current A/c Others (Pl. Specify)
	G IFS Code of the Bank Branch	
-		
dela		DECLARATION are given above are correct, complete and true to knolwedgement through ECS/NEFT/RGTS. If the electronic transaction / transfer is aplete or incorrect information, I/ we shall not hold the Institute resposible ions under any circumstances.
		(
		Singnature of Authorized Representative
		Designation:
L		Date
Cert	fied that the Bank particulars as mentione	
Date		Singnature of Bank Manager
Date	Seal Seal	Name :
	· 1000 1000 1000 1000 1000 1000 1000 10	91 4-7-1, \$4 79 \$2 \$2 \$3-47 \$2.1133 \$12 \$2.21 \$