

Registration Form

Please type or print in dark ink

1.	Name of Company with Correspondence address (As per GST, to Claim Input Tax Credit)	
	Country:	
	Tel. Nos.(Mention STD Code)	
	Web Site address:	
	PAN (Permanent Account Number)	
	Date of Incorporation	
	VAT / TIN / GST Number	
2.	Reasons for barcoding : If buyers requirement (Mention Name of Buyer, their Contact Name &Number)	
3.	Contact Person For Correspondence:	
	Designation:	
	Mobile No.:	
	Email :	
4	Name –Chief Executive/MD Mobile No.: Email :	
5	Name-Head IT: Mobile No.: Email:	
6	Name - Head Packagaing / Barcode Implementation (Responsible for Barcode Implementation)	
	Mobile No:	
	Email :	
7	Turnover of your Company of last Financial year (Rs in Lacs)	
8	Total no. of different products (SKU's manufactured / distributed)	
	Brand Names owned	
9	Is your company registered with SSI If yes provide regn. no.	
10	Nature of Business (Please tick your primary business)	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Distributor <input type="checkbox"/> Exporter <input type="checkbox"/> Others please specify
11.	DD/ Pay order No.	Dated Rs. Drawn on:
Signature & seal:		
Name :Designation		