

KYC Form

Company / Firm Name:	
Office Address:	
Billing Address:	
Phone / Fax No:	
Email ID:	
Date of Incorporation:	
Type Of Company: (Pls. Tick)	
<input type="checkbox"/> Proprietary <input type="checkbox"/> Partnership <input type="checkbox"/> Pvt. Ltd. <input type="checkbox"/> Public Ltd. <input type="text" value="Specify Others"/>	
GST No. :	PAN Details (Attach Copy) :
Nature Of Business : (Pls. Tick)	
<input type="checkbox"/> Reseller <input type="checkbox"/> Retailer <input type="checkbox"/> Corporate Reseller <input type="checkbox"/> System Integrator <input type="checkbox"/> E-tailer	
<input type="text" value="Specify Others-"/>	

COMPANY TURNOVER (FOR LAST TWO YEARS)

April – March (Years)	Lacs / Crores
Year 20 ____ to 20 ____	
Year 20 ____ to 20 ____	
No. of Employees	
No. of Branches	
Specify Location of Branches	
Office Space	Owned <input type="checkbox"/> Rented <input type="checkbox"/> Rent Per Annum <input type="text"/>

Bank Details

Bank Name # 1 :	No. of Signatories : _____
Name. : _____	Account No. : _____
IFSC Code. : _____	Bank Branch : _____
Type Of Account (Pls. Tick) : Cash Credit <input type="checkbox"/> Over Draft <input type="checkbox"/> General <input type="checkbox"/>	
Bank Limits : Cash (OD) / Credit : _____ L/C Limit : _____	
Bank Name # 2 :	No. of Signatories : _____
Name. : _____	Account No. : _____
IFSC Code. : _____	Bank Branch : _____
Type Of Account (Pls. Tick) : Cash Credit <input type="checkbox"/> Over Draft <input type="checkbox"/> General <input type="checkbox"/>	
Bank Limits : Cash (OD) / Credit : _____ L/C Limit : _____	
Channel Finance	Bank/NBFC _____ Limit _____ ROI _____ % pa
	Is this facility Supplier Specific <u>Yes / No</u> Supplier Name _____

Savex Technologies Pvt. Ltd.
Proprietor, Partners, and Directors details:

1. Name:		Residence Owned Yes / No
Residential Address :		<div style="border: 1px solid black; padding: 10px; width: 80%; margin: auto;"> <p style="text-align: center;">Affix Photo of Proprietor /Partner / Director</p> </div>
Qualification :		
% of Ownership in Business		
Mobile No. :		
Telephone No. :		

2. Name:		Residence Owned Yes / No
Residential Address :		<div style="border: 1px solid black; padding: 10px; width: 80%; margin: auto;"> <p style="text-align: center;">Affix Photo of Proprietor /Partner / Director</p> </div>
Qualification :		
% of Ownership in Business		
Mobile No. :		
Telephone No. :		

3. Name:		Residence Owned Yes / No
Residential Address :		<div style="border: 1px solid black; padding: 10px; width: 80%; margin: auto;"> <p style="text-align: center;">Affix Photo of Proprietor /Partner / Director</p> </div>
Qualification :		
% of Ownership in Business		
Mobile No. :		
Telephone No. :		

SUPPLIER DETAILS

1. **SUPPLIER NAME:** _____
 Which Products do you buy _____
 Annual Business done for last financial yr. Rs _____
 Average Monthly Business (Current Yr) _____ Credit Limit Rs. _____ Credit Period _____ days
2. **SUPPLIER NAME:** _____
 Which Products do you buy _____
 Annual Business done for last financial yr. Rs _____
 Average Monthly Business (Current Yr) _____ Credit Limit Rs. _____ Credit Period _____ days
3. **SUPPLIER NAME:** _____
 Which Products do you buy _____
 Annual Business done for last financial yr. Rs _____
 Average Monthly Business (Current Yr) _____ Credit Limit Rs. _____ Credit Period _____ days

Terms & Conditions

The applicant promises to provide information to us in advance before closure of any bank account from which any cheques has been issued.

Interest @24% p.a. will be charged for any kind of late payment from the due date till the final realization date. In case any cheque issued by you to Savex gets dishonored you will be charged Rs 500/- towards cheque bounce charges along with interest as stated above.

Any transaction done having payment term on immediate basis carrying Cash Discount if not paid as agreed, the Cash Discount for that particular transaction will be reversed.

This is to authorize Savex Technologies Pvt. Ltd. to verify your Bank/Trade credentials. Applicant's signature attests financial responsibility, ability and willingness to pay Savex Technologies Pvt. Ltd. invoices in accordance with agreed – upon terms.

Overdue accounts: The undersigned agrees to pay all penalties/service charges, reasonable legal/court fees incurred by Savex Technologies Pvt. Ltd.

We hereby agree to pay the value of goods /services purchased / provided to us on the due date as per agreed terms and condition of sale. We also declare that the information submitted herein is true and accurate.

We hereby agree not to hold back payment of Savex for any OEM/Third Party related issue.

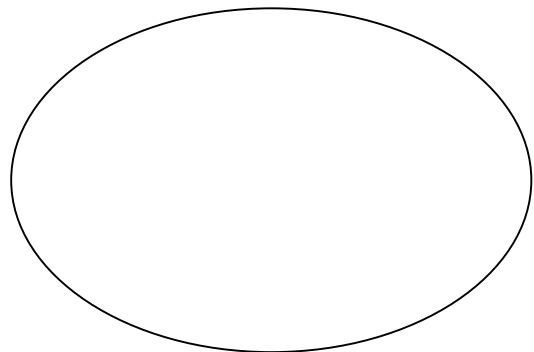
We will be raising invoice on you basis of GST information shared by you, it is your responsibility to check our invoice immediately on the receipt and if there is any discrepancy found, you will inform us immediately so that we can correct the same.

Under GST, transactions are required to be reported online on GSTN portal. You are requested to check the same at regular interval and if you find any discrepancy, please inform us immediately.

We will be charging GST as per our understanding and interpretation of GST Act provisions. If you have any difference of opinion on applicability of GST, HSN/SAC code, GST rates etc. on any transaction, you are not bound to follow what Savex is doing and will not hold Savex responsible if there is any demand is raised by tax authorities due to different interpretation by tax authorities. You are advised to take legal opinion from your legal consultant.

COMPANY STAMP & SEAL:

SIGNATURE OF OWNER/PARTNER/DIRECTOR



Signed by: _____

Designation: _____

Signed by: _____

Designation: _____

Signed by: _____

Designation: _____

FOR SAVEX OFFICE USE ONLY

Savex Branch Location: _____

Credit Rating : _____

Terms of Payment : _____

Credit Limit : _____

Credit Days : _____

Product : _____

Freight (Product Wise) : _____

Ref. Parties: Checked by Our Branch directly

A) _____ Cont. Person. _____

Remarks: _____

B) _____ Cont. Person. _____

Remarks: _____

C) _____ Cont. Person. _____

Remarks: _____

Other Remarks:

Verified & Signed by Savex Branch Manager - _____

List Of Documents to be Submitted:-

1. Copy of Main Bank Statements. (Minimum 3 Months)
 2. Copy of Audited Balance Sheet and Profit & Loss Account with Schedules (last three years).
 3. Residence Proof - Aadhar Card / Passport / Valid Driving License / Electricity Bill.
 4. Copy of Partnership Deed.
 5. Copy of Memorandum / Articles of Association.
 6. Invoice copies of other Distributors.
 7. Visiting Card
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