



**VIP Clothing Ltd**

C-6, St 22, MIDC, Andheri East,  
Mumbai 400093. India

**Pre – Requisite Vendor Registration Form**

(For Office Use)  
Vendor Code

**A. General Information:**

1.	<b>Name of the Vendor/Organisation</b>	Magic Web Services
	<b>Registered Office Address : (full address)</b>	PLOT NO. 123, SHREE GANESH APARTMENT, FLAT NO.202, SECTOR 19, KOPARKHAIRNE, City : <b>Navi Mumbai</b> _____ Pin : 400709 _____ State : _maharastra _____ Country: India _____
	1) Factory Address if different from office	City _____ Pin _____ State _____ Country _____
	2) Factory Address if different from office	City _____ Pin _____ State _____ Country _____
	3) Factory Address if different from office	City _____ Pin _____ State _____ Country _____
	4) Factory Address if different from office	City _____ Pin _____ State _____ Country _____
1.1	Web site URL	Magicwebservices.com
1.2	<b>Contact Person with Designation:</b> Telephone Mobile	Prashant Choudhary ( Business Development Manager ) 9594349228

	Fax E-mail	info@magicwebservices.com
1.3	Contact of Person Production In charge (Technical Head)	
1.4	Contact Person Proprietor/Partner/MD : Telephone Mobile Fax E-mail	
2	<b>Year of Establishment :</b>	2009
3.	<b>Registration Category (please tick)</b>	A- Manufacturer B- Importer /Exporter C- Trader /Supplier D- Authorized Dealer E – <b>Service provider</b> F. Others (please specify)

Please enclose copy of relevant certificate viz. Registration under Authorization Certificate from Principals for dealer/distributorship, etc.

**4. Constitution of Organisation: {Tick the correct one}**

4.1. Public Ltd Company	<input type="checkbox"/>
4.2. Private Ltd	<input type="checkbox"/>
4.3. Partnership Firm	<input type="checkbox"/>
4.4. Proprietorship Firm	<input checked="" type="checkbox"/>
4.5. Non-Profit Org	<input type="checkbox"/>
4.6. Government	<input type="checkbox"/>
4.7. Others	<input type="checkbox"/>

**B. Tax Registration Details :**

5.1. Income Tax PAN AGSPC3969N Issued by \_\_\_\_\_  
w.e.f \_\_\_\_\_

5.2. VAT TIN No \_\_\_\_\_ Issued by \_\_\_\_\_ w.e.f \_\_\_\_\_

5.3. CST NO \_\_\_\_\_ Issued by \_\_\_\_\_ w.e.f \_\_\_\_\_

5.4. Service tax \_\_\_\_\_ Issued by \_\_\_\_\_ w.e.f \_\_\_\_\_

5.5. GST 27AGSPC3969N1ZK Issued by 24/09/2017 w.e.f \_\_\_\_\_

5.6. LBT \_\_\_\_\_ Issued by \_\_\_\_\_ w.e.f \_\_\_\_\_

5.7. Central Excise \_\_\_\_\_ Issued by \_\_\_\_\_ w.e.f \_\_\_\_\_

Any other Relevant for us:

Please attach self-attested copies of above which ever is applicable

**C. Bank Details:**

6.1. **Domestic vendor:**  
a. Bank Account number : Magic Web Services

b. IFSC code : UBIN0555789

c. Bank Name Union Bank of India

d. Bank Branch : Kopakhairane

6.2. International vendor :

- a. Bank Account number: \_\_\_\_\_
- b. SWIFT CODE: \_\_\_\_\_
- c. Bank Name: \_\_\_\_\_
- d. Bank Branch: \_\_\_\_\_
- e. Correspondence Bank: \_\_\_\_\_
- f. Country: \_\_\_\_\_

**D. Information Specific to Vendor category:**

7. List of major products\*/services you intend to offer as a vendor:

\*Please enclose your company's product catalogue with detailed specification of the products

SR.No.	Major product/service	Are you original manufacturer for the listed products
1.		YES/NO
2.		YES/NO
3.		YES/NO
4.		YES/NO
5.		YES/NO

8.) Production / Supply – In terms of Capacity

Sr no	Name of Product	Quantity
1.		
2.		
3.		
4.		
5.		

9. Region Where as vendor you can supply

- a. All India
- b. Tamil Nadu
- c. Gujarat
- d. West Bengal
- e. Mumbai
- f. Delhi
- g. UP
- h. Bangalore
- i. Maharashtra

10.	Details of Quality Certification of products/company	
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10.1	ISI/BIS	
10.2	ISO	
10.3	Any other (please specify)	

11. Inspection/testing facilities available at the factory : Yes  No

12. Prefer day / visit to our Factory:

13. List of your major clients/customers

Sr .No.	Major Customer Name & Address	Product Supplied
1.		
2.		
3.		
4.		
5.		

13. Please enclose a copy of your organization's profile.

14. Financial details for last 3 Years:

Sr .No.	Financial Year	Turnover
1.		
2.		
3.		

15. Any other information which can help you in finalizing vendor registration with VIP Clothing Limited.

16. List of enclosures:

Sr .No.	Format Item No.	Description	No. of pages
1.			
2.			
3.			
4.			
5.			
6.			

I/ WE hereby confirm that:

1. I /we am/are new vendor(s) for VIP clothing ltd or its Group Companies hereinafter referred as ' The VIP Group ' and in past, I /we have never supplied or provided services to any of the offices of the company .

Or

I/we have supplied/served "The VIP Group" in the past under the name of \_\_\_\_\_ with vendor code \_\_\_\_\_ associated since \_\_\_\_\_. I /we hereby authorize "The VIP group "to adjust any outstanding lying in my /old account with the new vendor code.

2. Information and details provided by me/us above are true and correct to the best of my/our knowledge and undertake that any liability arising due to our misrepresentation of information, I am liable to make it good in favor of "The VIP Group".
3. I /we shall keep posted "The VIP group" informed, in time, of any changes in my /our constitution and/or details provided above.

4. Checklist of Document to be submitted :-

- a.) Copy of PAN card.
- b.) Copy of Excise Registration (If applicable).
- c.) Copy of GST Registration.
- d.) Copy of Balance sheet of last 3 years.
- e.) Copy of TIN Registration.
- f.) Copy of MSMED Registration.
- g.) Copy of Income tax return of last 3 years.
- h.) Copy of ISO certification (If any).
- i.) Copy of Service Tax Registration.

**Sign and stamp**



Name : Prashant Kumar

Place : Navi Mumbai

Designation BDM

Date 18/3/21

**Prepared By: Sourcing Manager / PPM**

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**Assessment and Evaluate By : Director ( for QA checked)**

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**Approved By: CMD**

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