

Annexure No 1

Request for Login ID on DTL e-Tender.

Form A

Vendor Details:

Name: _____

Field of Specialization/Manufacturing _____

Address: _____

State: _____ City: _____ Country: _____

Pin: _____

Telephone NO: _____ Extn: _____

Fax Number: _____

Email ID: _____

Your Company's Bank Name _____

Bank Account in the Name of _____

Type of Account (Please Tick): Savings/Current

Account Number: _____

Branch: _____

Address: _____

PAN number: _____

CST number: _____

MICR No: _____

Excise Regn Number: _____

SSI Number: _____

Contact Person's Name: _____

Designation: _____

Signature (with seal)