CUSTOMER REGISTRATION KYC FORM

(To be filled and printed on Letterhead and submitted along with required documents)

SECTION 1: COMPANY DETAILS

| • | Company Name: | | | |
|-----|--|-------------------------|---------------------------------|-------------|
| • | Registered Business Name | (if different): | | |
| • | Type of Business: ☐ Propriet | torship 🗆 Partnership 🗀 | Private Ltd. 🗆 Public Ltd. 🗀 LL | P 🗆 Others |
| • | Date of Incorporation: | | | |
| • | Registered Office Address: | | | |
| • | Operating Office Address (in | f different): | | |
| • | GST Number: | | | |
| • | PAN Number: | | | |
| • | CIN (if applicable): | | | |
| • | | | | |
| • | Nature of Business: | | | |
| • | Annual Turnover (in INR): | | | |
| SEC | TION 2: CONTACT DETAIL | | | |
| • | Authorized Person Name: _ | | | |
| • | Designation: | | | |
| • | Telephone N <mark>umber:</mark> | | | |
| • | Mobile Number: | | | |
| • | Email ID: | | _ | |
| • | Company We <mark>bsit</mark> e (if any): _ | | | |
| • | Registered Address: | | | |
| | City: | PIN Code: | State: | |
| • | Billing Address (if different) | : | | |
| | Citv: | PIN Code: | State: | |

| | • | Primary Contact Person: | | | |
|----|--|--|--|--|--|
| | | o Designation: | | | |
| | | o Phone Number: | | | |
| | | o Email ID: | | | |
| | | | | | |
| | • | Alternate Contact Person: | | | |
| | | Designation: | | | |
| | | o Phone Number: | | | |
| | | o Email ID: | | | |
| | | | | | |
| SE | СТ | ION 3: BANK DETAILS | | | |
| | Bank Name: | | | | |
| | • Branch: | | | | |
| | Account Number: | | | | |
| | • IFSC Code: | | | | |
| | • | SWIFT Code (if applicable): | | | |
| | | | | | |
| SE | СТ | ION 5: STATUTORY DOCUMENTS (Attach Self Attested Copies) | | | |
| | PA | N Card | | | |
| | GS | Registration Certificate | | | |
| | MS | ME Certificate (if applicable) | | | |
| | Certificate of Incorporation | | | | |
| | ☐ Cancelled Cheque (for bank verification) | | | | |
| | □ Latest IT Returns | | | | |
| | □ Address Proof (Electricity Bill/Utility Bill) | | | | |
| | Authorized Signatory ID Proof (Aadhaar/Passport/Driving License) | | | | |
| | Other (if any) | | | | |

| SECTION 6: DEC | LARATION |
|---|--|
| agree to comply wit provided details fo | information provided above is true and correct to the best of my/our knowledge. I/We has the terms and conditions set by Techinergy . I/We authorize Techinergy to use the representations, and I/We understand that any incorrect or incomplete sult in transaction delays or rejections, for which Techinergy shall not be held |
| | |
| Date: | Company Seal & Stamp / Authorized Signature |
| | |