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Section 1: Company Details and General Information

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|--|--|
| 1. Name of Company: | |
| 2. Office/Mailing Address: | City |
| | Pin code |
| | State |
| 3. Website: | Country |
| 4. Contact Person: | 5. Functional Title: |
| 6. Mobile: | 7. Telephone: |
| 8. E-mail: | 9. Year Established: |
| 10. Works Address: Same as above | City: |
| | Pin code: |
| | State: |
| 11. E-mail: | Country: |
| 12. Parent Company (Full Legal Name): | 13. License no./State of registration: |
| 14. Type of business Proprietorship Private Limited Partnership Other: _____ | |

Section 2: Financial Details

| | | |
|--------------------------|---|----------------|
| 15. GST Number | 16. Sales Tax Number | 17. PAN Number |
| 18. Bank Name: | | |
| Address/Branch: | | |
| Swift/BIC: | | |
| 19. Bank Account Number: | | |
| Account Name: | | |
| 20. Undertaking: | By checking this box I agree to receive funds online along with associated and transaction charges | |

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Section 3: Technical Capability and Information on Goods/Services Offered

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| 21. Quality Assurance certification (e.g.: ISO 9000 or Equivalent) (Attach a latest copy) | |
| 22. List any National or International Trade or Professional Organizations of which your Company is a Member. | |
| 23. International Offices/Representation (Countries where the Company has local Offices/Representation) {Country, City} | |
| 24. List below up to ten(10) of your core Goods/Services Offered: | |
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| | |
| | |
| 25. Total number of employees/workers: | |
| 26. List of tools and calibration status: | |
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| <p>27. Certification:</p> <p>I, the undersigned, hereby accept the basic General Conditions – a copy of which has been provided to me and warrant that the information provided in this form is correct. In the event of change, details will be provided as soon as possible.</p> | |
| Name: | Signature: |
| Functional Title: | |
| <p>Please e-mail completed form to: purchase@ecomak.co.in</p> <p>NOTE: By completing this form it does not automatically mean you will be added to our Vendor Database. There will be a review and an evaluation process that must take place first.</p> | |

VENDOR UNDERTAKING


I _____ designation _____ hereby certify that that I have reviewed our organization's compliance record for the period from 01-01-2017 till today date: ___/___/_____ and that our organization is compliant as per the acts and rules related to Labor, Human rights and Governance in general and following in particular:

1. Companies Act
2. Income Tax Act
3. Minimum Wages Act
4. Employees Provident Fund & MP Act
5. ESI as applicable / Workman's Compensation Policy
6. Child Labor Act
7. Industrial Dispute Act
8. Employee health and Safety legislation as applicable to Factory.
9. Environment related legislation as applicable to Factory.

Sign – Stamp

Date:

Company Name:

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INSTRUCTIONS FOR COMPLETION

The form should be typewritten in UPPERCASE and completed clearly and accurately ensuring that all questions are answered. The numbers below correspond to item numbers on the registration form:

1. Full name of company.
2. Full street address of your company. List City, Pin Code, State and Country in separate fields.
3. WWW Address or official website and year established in separate field.
4. Name of Contact person/ in-charge at Office location.
5. Functional title of the contact person in the company
6. Mobile number, including country and area codes.
7. Telephone number of contact person.
8. E-mail of contact person/account at factory location.
9. Indicate the year in which the organisation was established under the name shown in Item 1.
10. Full address of your factory location/ Workshop with city, pin code, state and country in separate fields.(Check the box if same as office address).
11. E-mail of the contact person at factory location.
12. Full legal name of parent company, if any.
13. Provide the license number under which the company is registered, or the State where it is registered
14. Please tick one box. If the last box is ticked, please specify.
15. Provide the GST number or Tax ID of the company.
16. Provide the Sales Tax Number of the company.
17. Provide the Company PAN number.
18. Provide the full name, address and SWIFT address of the bank used by the company.
19. Provide the company's bank account number and the account name.
20. Check the box to agree to terms and conditions of banking.
21. List any Quality Assurance Certificates (e.g. ISO 9000 series) that have been issued to your company and provide a copy of the latest certificates.
22. Provide details of all national and international trade or professional organisations to which your company belongs.
23. List all countries where the company has local offices or representation. Please provide, on a separate sheet if necessary names and addresses of all subsidiaries, associates and overseas representatives if any.
24. Please list up to 10 of the core goods/services offered. For each item, list the National/International Quality Standard to which it conforms.
25. Indicate the total number of full-time personnel in the company.
26. List the core tools of business and their calibration status in parenthesis.
27. Please read the enclosed General Conditions carefully, as signature of the form signifies acceptance. The form should be signed by the person completing it and their name and title should be typed, along with the date.