

**NATIONAL DEFENCE ACADEMY**

**APPLICATION FOR REGISTRATION AS SUPPLIER**

1. Name of Firm :
2. Name of proprietor of the firm :
3. Complete address of the firm :
  
4. Tele[hone/Fax No :
5. Particulars of items delt with by the Firm :
6. Central Sales Tax Regn No :
7. State Sales Tax Regn No :
8. Particulars of Registration with other Govt/Def Establishments, if any :

(Signature of the Proprietor)

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**Note -** Copy of the following are required to be attached along with application form for documentary proof:-

- (a) BST, CST, VAT, TIN Shop Act registration & Income Tax Clearance Certificate.
- (b) Certificate on a non judicial stamp paper worth Rs 100/- regarding physical existence of the firm.
- (c) ECS mandate.
- (d) Certificate from the Vendors bankers to be attached duly signed by the bank Manager for verification of accounts. This should be the same account as mentioned as ECS mandate.

**ECS MANDATE**

(ECS Authorization cum Banker's certificate)  
(these to be filled by customer and certified by Banker)

To,

Pr CDA (SC)  
No 1 Finance road Opp CPO Pune- 411 001  
Tele No 261132488, 26128727, 2612875, Exit 115, 125  
Tele Fax No 26132488 E-mail cda-pune @hub.net.in.

Dear Sir,

I/we hereby declare that I/we are suppliers to the Army Units covered under the payment jurisdiction of office of the Pr, CDA (SC) Pune. I/we hereby express our willingness to accept all payments against suppliers etc by the office of the Pr, CDA (SC) Pune by ECS. In order to facilities the ECS payment. The ECS mandate as below is hereby given.

1. Customer Name \_\_\_\_\_
2. Particulars of the Bank account \_\_\_\_\_
  - (a) Bank Name \_\_\_\_\_
  - (b) Branch Name \_\_\_\_\_
  - (c) 09 Digit Code Number of the bank and branch appearing on the MIRC cheque issued by the bank.

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- (d) Account Type Saving/Current (tick one)/Cash/Credit (CC) Account.
- (e) Ledger Number \_\_\_\_\_  
Ledger Folio No \_\_\_\_\_
- (f) Account Number \_\_\_\_\_  
(As appearing on the cheque book)
- (g) Date of effect \_\_\_\_\_

I/ we hereby declare that the particulars given above are correct and complete and if the transaction is delayed or bot effected at all for reasons of incomplete or incorrect information. I/we would not hold IDBI Bank responsible. I/we/are aware of the Electronic Clearing Service scheme and I/we agree to discharge my/ our responsibility expected of me as a particular under the scheme.

Yours Truly,

Signature of Sole/first account holders  
Name \_\_\_\_\_

Signature of Second/Joint account holder  
Name \_\_\_\_\_

(Please Note - \_\_\_\_\_ to be signed by all account holders as per mandate on the saving/current/a/c with the bank)

Certified that the particulars furnished above are correct as per our records.

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Bank Stamp  
Date  
Name of Authorized Signature \_\_\_\_\_ Authorized Officer  
Signature of the authorized signature  
Signatory  
  
Branch Manager  
(Seal Signature of the Bank)