



# VENDOR CARDEX FORM

Materials Data Bank

Please type or write in block letters and tick  against the appropriate box.

For Office use only : Party Code No.

Brief Name

1. Name of the Company \_\_\_\_\_

2. Office Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PIN \_\_\_\_\_

Telephones with STD code \_\_\_\_\_ Telefax with STD code \_\_\_\_\_

E-mail/Hotmail \_\_\_\_\_ Website \_\_\_\_\_

Weekly off

Sun - 1

Mon - 2

Tue - 3

Wed - 4

Thu - 5

Fri - 6

Sat - 7

3. Name & contact No/s with STD code of the proprietor  \_\_\_\_\_

Partners  \_\_\_\_\_

Directors  \_\_\_\_\_

(Please enclose Organisation Structure)

Contact /Dealing Person \_\_\_\_\_ Designation \_\_\_\_\_

Resi. Tel. No/s with STD code \_\_\_\_\_ Resi. Fax No. with STD code \_\_\_\_\_

4. Works Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PIN \_\_\_\_\_

Telephones with STD code \_\_\_\_\_ Telefax with STD code \_\_\_\_\_

E-mail/Hotmail \_\_\_\_\_

Contact /Dealing Person \_\_\_\_\_ Designation \_\_\_\_\_

Resi. Tel. No/s with STD code \_\_\_\_\_ Resi. Fax No. with STD code \_\_\_\_\_

Weekly off

Sun - 1

Mon - 2

Tue - 3

Wed - 4

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5. Status of the Co. (A) 

Public Ltd. - 1	Pvt. Ltd. - 2	Partnership - 3	Prop. - 4
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(B)

SSI

Non SSI

6. Payment cheques to be posted on address : \_\_\_\_\_  
\_\_\_\_\_

7. Employees : (1) Unskilled Workers \_\_\_\_\_ (4) Managerial Staff \_\_\_\_\_

(2) Skilled Workers \_\_\_\_\_ (5) Total Strength \_\_\_\_\_

(3) Supervisory Staff \_\_\_\_\_

Labour Union Details : \_\_\_\_\_ Last Aggrement Valid up to \_\_\_\_\_

Labour Problem During last 3 years : \_\_\_\_\_

8. Area Plot Area \_\_\_\_\_ Covered Area \_\_\_\_\_

9. (a) Your organisation is registered with : \_\_\_\_\_

Regn. No. \_\_\_\_\_ Date : \_\_\_\_\_

(b) Excise notification No. \_\_\_\_\_ Date : \_\_\_\_\_

(c) Any Govt. assisting agency : Yes  No  If yes, Regn. No. \_\_\_\_\_ Date : \_\_\_\_\_

(d) Any Sales Tax / Excise exemption \_\_\_\_\_

(e) Inside / Outside Octroi Limit \_\_\_\_\_

10. E. C. C. No. : \_\_\_\_\_ 11. B. S. T. No. : \_\_\_\_\_  
 12. C. S. T. No. : \_\_\_\_\_ 13. M. P. S. T. No. : \_\_\_\_\_  
 14. I. Tax PAN No. : \_\_\_\_\_  
 15. (a) Names of your reputed customers (with % share in your business) : \_\_\_\_\_  
 \_\_\_\_\_  
 (b) Name of your overseas customers (Exports) \_\_\_\_\_  
 \_\_\_\_\_  
 16. (a) Products manufactured by you : \_\_\_\_\_  
 \_\_\_\_\_  
 (b) Capacity : Installed \_\_\_\_\_ Spare \_\_\_\_\_ Expansion Plan \_\_\_\_\_  
 (c) Quality Certification : ISO / VDA 6.1 / QS-9000 / TS-16949 \_\_\_\_\_  
 (d) Have you participated in BTL SQIP Programme earlier? Yes/No. if Yes SQIP Rating (A  B  C  )  
 (e) Rejection Level of existing BTL items (PPM) \_\_\_\_\_  
 17. Electric Power - Required - \_\_\_\_\_ Available from El. Board - \_\_\_\_\_  
 (in KVA) Self Generated - \_\_\_\_\_  
 18. Do you have a qualified Metallurgist ? \_\_\_\_\_ Yes / No  
 (Items 19, 20 and 21 are not applicable to regular suppliers of Bajaj Tempo Ltd.)  
 19. Will you accept our payment terms i. e. Payment within 45 days from receipt of  
 Materials and acceptance thereof ?  
 20. Logistics Plan : (a) Transport : Owned  / Hired  (b) Warehouse facility for JIT supply : Yes / No  
 21. Did you apply for registration in BTL before, and if so what was the result ?  
 22. If any of your relative/s is/are working in BTL, please give details on separate sheet.  
 23. Please furnish us machinery details separately viz : (1) Type of Machine (2) Type of Facility (Heat Treatment  
 Painting / Testing / Inspection / Tool Room) (2) Make and Model (3) Machine Specifications (including El Power  
 Rating) (4) No. of Machines (5) Usage (6) Year of purchase (7) Free capacity available (in no. of shifts per month).

24. FINANCE - Please give maximum details and enclose a copy of balance sheet.

I T E M Year (Rs. in Lakhs) Months	Past 2 Years		Current Year	Next 2 Years (Projections)	
Share Capital					
Reserves					
Borrowings					
Total Investment					
Gross Fixed Assets					
Sales					
Direct Material consumed					
Profit before tax					
Profit after tax					
Exports					
R & D Expenditure					
No. of Employees					

25. Please attach separate page/s for any special technology you possess or plan to acquire, explaining the benefits of the same. Please indicate important development activities undertaken by you giving the names of customers and the list of special items developed by you.

26. Please attach separate page/s for any other relevant additional information.

Signature : \_\_\_\_\_

Name : \_\_\_\_\_

Date : \_\_\_\_\_

Designation : \_\_\_\_\_