



# Tulip Paints

A/1703, Yogi Paradise, Yogi Nagar, Borivali (West), Mumbai: - 400 092, Maharashtra, India.

Tel.: [\(+91\) 8976076012](tel:+918976076012) / [7498 638 057](tel:+917498638057)

E-mail: [tulippaints@gmail.com](mailto:tulippaints@gmail.com) Website: [www.tulippaints.in](http://www.tulippaints.in)

## SUPPLIER REGISTRATION FORM

A	Company Profile		
	Name of the Firm / Company		
	Nature of the Business Manufacturer / Authorized Agent / Trader / Service Sub- Contractor		
	Items of Manufacture /supplies for which registration sought (Attached details of the products / services/ Technical Leaflets)		
	a) Factory Address / Phone No. / Fax No / Email ID		
	(b) Registered Office Address / Phone No./FAX No/ E-Mail / Website		
	(c) Sales Office/Correspondence Address /Phone. No. / FAX No. / Email ID		
	Whether Private Limited / Partnership Firm / Proprietary Firm / Public Limited		
	Name of the Directors / Partners / Proprietor.		
	(a) Factory License / Municipal Shop's & Establishment Certificate No. (b) Consent to operate form State Pollution Control Board (c) FDA Approval		
	(a) VAT Registration No. (b) CST Registration No. (c) Excise Registration (d) Registration under Service Tax		
	Date of commencement of Business		
	Approximate Annual Turnover In last Three Years	Year	Year
			Year



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<b>B QMS Profile</b>						
Are you an ISO 9001:2008 Certified company Yes / No. If yes, please enclose copy of the certificates				Name of Certification Body		
				Name Accreditation Body		
				Certificate valid till		
<b>C Quality Profile</b>						
Do you have capability for areas of supplies you are interested in with respect of					Yes	No
Design and Development						
Quality Control / testing facilities						
Manufacturing the items						
<b>D Test and Inspection Equipment Available (For Items For Which Registration Is Sought)</b>						
Details of the Test Equipments		Make	Age of Test Equipments	Accuracy	Calibration Status (Cert. No. & traceable to which national / international standard)	
This information may be given on a separate sheet as per the format						
<b>E Production Equipment Available (for the items for which registration is sought )</b>						
Name of Machine		Capacity	Age of Machine	Accuracy	No. of Machine	Make & Model
This information may be given on a separate sheet as per the format						
<b>F Staffing Profile</b>						
Details of manpower Employed						



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	Managerial		Technical		Skilled Employee's		Administration	
	QC / R & D		Supervisory		Unskilled Employee's		<b>TOTAL</b>	
<b>G</b>	<b>Major customer to whom similar items are supplied. Please give details of 5 recent major orders.</b>							
	Organization	Details of items supplied	P. O. No.	Date	Invoice No.	Date	Qty.	Latest vendor rating
	This information may be given on a separate sheet as per the format							
	Have you ever been Banned / Black Listed by any of your customers? If so, give details.							

## DECLARATION BY THE APPLICANT FIRM / COMPANY

I / We hereby declare that the information pertaining to my / our Firm / Company including all enclosures is correct and true to the best of my / our knowledge and belief as on date.

NAME \_\_\_\_\_

DESIGNATION \_\_\_\_\_

DATE \_\_\_\_\_

AUTHORISED SIGNATORY  
SEAL OF THE COMPANY

SUPPLIER EVALUATION (For Official Use Only)		
	ATTRIBUTES	RATING
1	ISO Certified Company, (B)	
2	Technical capabilities (C, D, F) Adequacy of Technical person, QC facilities in case of manufacturing	
3	Manufacturing Capacity & Capability (E,F) Adequacy of plant, machinery, equipment and instruments in case of manufacturing	
4	Customer Base (G) Major customer to whom similar items are Supplied	

	Status	Remark
1	Supplier Registered	
2	Supplier registered based on first three lot	
3	Supplier not registered	

Remark:

Authorized Signatory  
Date