

Neeravil, Perinad P.O., Kollam, Kerala, India-691 601 Ph: 0474-2700294, 2700295, 2705657

To, SHIPMENT SOLUTIONS

## KNOW YOUR CUSTOMER (KYC) FORM

Date:

09.05.2022

Sr. No.	Particulars	(To be Filled by Shipper/ Consignee / CHA)	
1	Name & Address of Consignee / Forwarder/CHA*(INVOICE PARTY)	UNIGREEN FOODS (INDIA) PVT. LTD., NEERAVIL,	
		PERINAD.P.O, KOLLAM	
2	Constitution (Pvt. Ltd., LTD., Partnership, Proprietorship) *	Pvt. Ltd.	
3	Date of Establishment *	2016	
4	IEC No. * (if Consignee / Shipper) (IEC COPY REQUIRE	5316500199	
5	CHA / MTO No (if CHA / Forwarder)		
6	Permenant Account No. (PAN) *	AABCU9696C	
7	Tax Deduction Account Number(TAN)*		
8	GST Registrarion No.*(GST COPY REQUIRED)	36AABCU9696C1Z6	
9	Nature of Business *	Manufacturer	
10	Name, Mobile No, Tel Nos and E-Mail id of Accounts / Finance Head *	9895428985 , unigreenindia@gmail.com	
11	Name & Mobile No, Tel. Nos and E-Mail id of Decision maker or Authorised person interacting on day to day basis for business *		
12	Bank Details *	Name & Address	IDBI BANK LTD, KOLLAM
		Telephone No. (Bank)	
		A/c. No.	0737651100001045
		MICR No. of the Bank	
		RTGS Code No.	IBKL0000737
13	I hereby declare the above information is true & correagree to keep your office informed and re-submit the		
14	Authorised Signature with Company Seal *	For UNIGREEN FOODS (INDIA) PVT. LTD.	
15	Full Name of the Authorised Signatory *	RAJESH SET X DATORY	
16	Place of Submission	KOLLAM	