

MODI PROPERTIES PVT. LTD.
CONTACTOR REGISTRATION FORM

Name of company/firm: **KIKKARA GANAPATHI**

Office mobile/landline: **9989822596**

Address for communication: Flat/house/office no: **2-229/A** Office email:

Location: **B C colony** Landmark: **Hyderabad** Street:

City/town/village: **Jadupalle, Shamipet Mandal** District/state: **Telangana** Pin code: **532216**

Nature of company/firm: ☒ Individual / Proprietorship ☐ Partnership / LLP ☐ Pvt. Ltd. Company ☐ Limited Company ☐ Other

Contact details:

No	Description	Name	Mobile	Email
1.	Proprietor/director/partner/owner	Kikkara Ganapathi	9989822596	
2.	Head mason/supervisor			
3.	Other supervisor			
4.	Other supervisor			
5.	Contact person for accounts			

Details for payment:

Pan card no: **DL2PP6002A** GST no:

Bank Name: **State Bank of India** Branch: **Thumukunta** Bank a/c no: **42006412734**

Sign of Proprietor/director/partner/owner: **Scaffolding** IFSC code: **SBIN0020662** Date: **06/07/23**

For office use only (do not fill/write).

Description of work: ☐ Civil, ☐ RCC, ☐ Plumbing, ☐ Electrical, ☐ Equipment hire ☐ Painting ☐ Tile fitting ☐ Earth work ☐ Core cutting ☐ Rock cutting ☐ Road work ☐ Gardening ☐ House Keeping ☐ Security Services ☐ Bore-well ☐ Digital Surveyor ☐ Soil Testing ☐ Cladding ☐ Granite fitting ☐ Carpentry ☐ Welding ☐ Kadi Fixing ☐ Other ☒ Railing work ☐ AC service ☐ RO plant service ☐ Generator service ☐ Pump repair ☐ Transportation Service

Type of work: ☐ Labour only ☐ Material + Labour ☐ Equipment hire ☐ Other

CRN No.:

VERIFIED BY: **APPROVED** Name: **Kikkara Ganapathi** Sign: **KG** Date: **06/07/23**

06 JUL 2023
Notes: This form to be applied by admin-audit manager and uploaded on M-codex.

N.NARENDER REDDY
ASST. MANAGER-AUDIT

आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



नाम / Name

KIKKARA GANAPATHI

पिता का नाम / Father's Name

CHINNAVADU KIKKARA

जन्म की तारीख / Date of Birth

01/01/1995

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

DLZPP6002A



Handwritten signature

हस्ताक्षर / Signature

34591

SBI

Branch: THIRUVAITHI
STATE BANK OF INDIA

Email: sbi.206620babi.co.in
Phone No.: 247256
IFSC: SBIN0020662

Code: 20662

Name: Mr. N. K. Chinnappa Chinnappa

S/O/A/O: LATE K. K. Chinnappa Chinnappa

IF Number: 91725210700

Account No.: 42006412734

A/c Type: REGULAR SAVINGS BANK ACCOUNT

Address: C/O: N. K. Chinnappa Chinnappa, 2-229/A, 8 C. 00

City:

Tirunelveli

Phone No.:

Mail:

C.O.D. (If filled):

PO Number:

Branch: THIRUVAITHI

IFSC: SBIN0020662

Account No.: 42006412734

A/c Type: REGULAR SAVINGS BANK ACCOUNT

Date of Opening: 16/06/2023

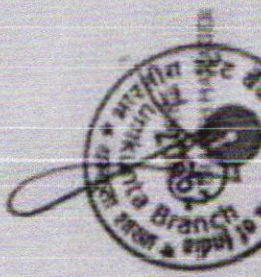
Customer's PAN:

Date of Issue: 16/06/2023

First:

Post Code: 532216

Sr. City Flag:



16/06/2023