To,

The Finance Officer

Sikkim University

6th Mile, Gangtok - 737012

**PFMS – FORM NO. 1**

**REQUIRED VENDORS DETAILS FOR REGISTRATION IN PFMS**

|  |  |  |
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| **SL. NO.** | **ITEMS** | **PLEASE FILL IN BLOCK LETTERS ONLY** |
| 1. | TYPE (PESONAL/COMMERCIAL/INSTITUTIONAL/SMALL BUSINESS FINANCE/SMALL SCALE INDUSTRIES/NGO/GOVT. OFFICIAL IMPREST |  |
| 2. | BUSINESS NAME |  |
| 3. | VENDOR NAME |  |
| 4. | DATE OF BIRTH/ DATE OF INCORPORATION |  |
| 5. | FATHER/HUSBAND NAME |  |
| 6. | ADDRESS WITH PIN NO |  |
| 7. | MOBILE NO |  |
| 8. | EMAIL ID |  |
| 9. | GST NUMBER |  |
| 10. | PAN NUMBER |  |
| 11. | TIN NUMBER |  |
| 12. | TAN NUMBER |  |
| 13. | BANK NAME |  |
| 14. | BANK BRANCH |  |
| 15. | BANK ACCOUNT NO |  |
| 16. | IFSC CODE |  |

**SIGNATURE OF PROPRIETOR**

**WITH DATE & SEAL**