

KOLKATA PORT TRUST
KOLKATA DOCK SYSTEM

CUSTOMER REGISTRATION FORM

[FORM TO BE FILLED UP BY TYPING, SIGNED AND SUBMITTED TO
KOLKATA DOCK SYSTEM
(USE BLOCK CAPITAL)

I. COMPANY NAME:

GROUP: (USE ✓ MARK) GOVT SEMI-GOVT
 CORPORATE OTHERS

II. A. FULL BILLING ADDRESS:

PIN CODE:

III. A. ADDRESS OF REGISTERED OFFICE OF COMPANY/ENTITY:

PIN CODE:
Fax Number (With STD Code): [] []

IV. PERMANENT ACCOUNT NUMBER (PAN):

GST IDENTIFICATION NUMBER (GSTIN):

V. TAX DEDUCTION ACCOUNT NUMBER (TAN):

VI. INCOME TAX CIRCLE :

VII. a. CUSTOM HOUSE AGENCY CODE
(if any) : (Mandatory for C&F Agents)

b. HOUSE AGENCY LICENSE NUMBER
(Mandatory for C&F Agents)

c. Kolkata Port Trust Registration Number
(Mandatory for Steamer Agents/C&F Agent)

VIII. CUSTOM HOUSE AGENCY VALIDITY UPTO :
(if any) (Mandatory for C&F Agents)

IX. TELEPHONE NUMBERS OF CONTACT OFFICE:
WITH STD CODE

1	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>
2	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>
3	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>

EMAIL:

X. FAX NUMBERS OF CONTACT OFFICE
[WITH STD CODE]:

<input style="width: 90%; height: 20px;" type="text"/>	<input style="width: 90%; height: 20px;" type="text"/>
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XI. TYPE OF OPERATION: [PLEASE (√) **TICK** ONE OR MORE AS APPLICABLE]

- | | |
|---|---|
| <input type="checkbox"/> STEAMER AGENT | <input type="checkbox"/> MAIN LINE OPERATOR |
| <input type="checkbox"/> BARGE OPERATOR | <input type="checkbox"/> CHARTERER/ AGENT |
| <input type="checkbox"/> C&F AGENT | <input type="checkbox"/> CARGO HANDLING AGENT |
| <input type="checkbox"/> IMPORTER/EXPORTER | <input type="checkbox"/> SURVEYOR |
| <input type="checkbox"/> STEVEDORE/SHORE HANDLING AGENT | <input type="checkbox"/> CFS/ICD OPERATOR |
| <input type="checkbox"/> LESSEE/LICENSEE | <input type="checkbox"/> ELECTRICITY CONSUMER |

OTHERS [Specify]

XII. **BANK ACCOUNT DETAILS** [*for effecting refund through bank directly*]

- a Bank Name
- b Bank Account Number
- c Account Type : (Cash Credit/Current/Savings)
- d Branch Name:
- e Branch Address (Full with PIN code):
- f Eleven digit RTGS Code Number of the Branch
- g Nine digit MICR Code Number of the Branch:
- h Phone Number of Branch
- i Fax Number of Branch

I/We declare that the above particulars are true to the best of our knowledge and has been furnished after due verification of relevant records. We also undertake that we would notify Kolkata Dock System about any change in the above particulars as and when it occurs. It is also confirmed that the undersigned is duly authorised by the Company/firm to deal with all matters with Kolkata Dock System including signing such declaration/confirmation. We also accept that KDS shall not be responsible for delay in credit of refund in our A/C (mentioned above), attributable to Banks. Further, we shall be solely responsible for any eventuality arising out of incorrect and/or incomplete information being furnished by us above. We also undertake to intimate KDS about any change by filling up a separate form immediately.

- Enco:** 1. Copy of PAN Card & GSTIN Certificate (For all)
2. Copy of Custom House Registration Certificate
Indicating Code No, License No & Validity
(For C&F Agents Only)
3. Registration Certificate of Kolkata Port Trust.
(For Steamer Agent & C&F Agents)

Signature of Authorized Signatory
*Full Signature with
Name and Designation*
[Put Rubber Stamp of Company]

Date:

Confirmation from Bank with sign and seal

To be furnished over the Letterhead of the Company/Firm]

[Submit three copies all in Original]

CUSTOMER REGISTRATION FORM
KOLKATA DOCK SYSTEM
DETAILS OF AUTHORISED SIGNATORIES

Name of Company:

I. OPERATIONAL MATTERS:

Name	Designation	Specimen Signature [To be signed by Black Ball Point Pen]	TEL. NO., MOBILE NO. & E- MAIL ADDRESS
			Tel: Mob: Email:
			Tel: Mob: Email:
			Tel: Mob: Email:

**II. FINANCE RELATED MATTER INCLUDING DRAWAL OF REFUND CHEQUE/
SIGNING DECLARATION / GIVING UNDERTAKING (Binding the Customer):**

1. Signing Declaration and Giving undertaking on behalf of the Company:

Name	Designation	Specimen Signature [To be signed by Black Ball Point Pen]	TEL. NO., MOBILE NO. & E- MAIL ADDRESS
			Tel: Mob: Email:
			Tel: Mob: Email:
			Tel: Mob: Email:

2. Collection of Bills/ Treasury Receipts / Refund Cheques Other Miscellaneous Financial Matters

Name	Designation	Specimen Signature [To be signed by Black Ball Point Pen]	TEL. NO., MOBILE NO. & E- MAIL ADDRESS
			Tel: Mob: Email:
			Tel: Mob: Email:
			Tel: Mob: Email:

Note: Any change in the above shall have to be notified by giving similar declaration.

Signature with Name and Designation

Date:

Encloses: **Copy of Power of Attorney of the signatory.**

[TO BE FURNISHED IN LETTERHEAD OF THE COMPANY]

**REQUEST FOR CHANGE IN BANK PARTICULARS
FOR RELEASE OF REFUND CLAIM AS WELL AS PAYMENTS AGAINST BILLS**

We hereby submit the following particulars of our Bank for forwarding payment against Bills as well as release of refund (when introduced) in our account, from Kolkata Dock System. The earlier details furnished may be amended.

I. BANK ACCOUNT DETAILS [for effecting payment/ refund through bank directly]

a	Bank Name	<input type="text"/>	
b	Bank Account Number	<input type="text"/>	
c	Account Type : (Cash Credit/Current/Savings)	<input type="text"/>	
d	Branch Name:	<input type="text"/>	
e	Branch Address (Full with PIN code):	<input type="text"/>	
f	Eleven digit RTGS Code Number of the Branch	<input type="text"/>	
g	Nine digit MICR Code Number of the Branch:	<input type="text"/>	
h	Phone Number of Branch	<input type="text"/>	<input type="text"/>
i	Fax Number of Branch	<input type="text"/>	<input type="text"/>

I/We declare that the above particulars are true to the best of our knowledge and has been furnished after due verification of relevant records. We also undertake that we would notify Kolkata Dock System about any change in the above particulars as and when it occurs. It is also confirmed that the undersigned is duly authorized by the Company/firm to deal with all matters with Kolkata Dock System. We also accept that KDS shall not be responsible for delay in credit of payment/ refund in our A/C (mentioned above), attributable to Banks, when such facility is introduced.

Signature of Authorized Signatory
*Full Signature with
Name and Designation*
[Put Seal of the Company]

Date: