

FINANCE DEPARTMENT
Government of Mizoram
BENEFICIARY REGISTRATION UNDER IFMIS

ANNEXURE-I (BENEFICIARY REGISTRATION FORM)

Note: All asterisk * marks are mandatory to fill

A. BENEFICIARY DETAILS

1. Type of Organization (any one)*

☐

Dealers and Suppliers

☐

Company

☐

Consultant

☐

Contractor

☐

Corporation

☐

Autonomous

2. CIN/Firm/Office Regn. No*: _____

B. COMMUNICATION DETAILS

❖ **Office/Business Address**

- a. House No. : _____
- b. Locality* : _____
- c. City/Town/Village* : _____
- d. District* : _____
- e. Police Station* : _____
- f. Post Office* : _____
- g. Pin code* : _____
- h. State* : _____
- i. Country* : _____

C. ORGANIZATION DETAILS

1. Designation of the Head of Office*: _____
2. Mobile Number*: _____ Email: _____
3. Registered Name of Office/Firm: _____
4. TIN Number: _____ PAN Number*: _____
5. GSTIN Number*: _____

D. BANK DETAILS

1. Beneficiary Name* : _____
2. Bank Name* : _____
3. Name of Bank Branch*: _____
4. Bank Account No.* : _____
5. MICR Code* : _____
6. Bank IFSC Code* : _____

E. SUPPORTING DOCUMENTS*

1. PAN Card/GSTIN of organization (photocopy)
2. GST Registration Card (photocopy) 3. Bank pass book - showing bank acc no., MICR, IFSC

NB: Document attached must be clear and legible.