KYP (Know Your Payee) Form (*Marked fields are mandatory)

Personal Details :-

Payee Name*	TECHCARE SOLUTION		
Date Of Registration Of Company*	15.02.2017		
Authorized Mobile No*	9334175840		
Athorized Email ID*	techcaresolutionpatna@gmail.com		

Bank Account Details:-

Account Type * (Saving/Current/Cash/Credit)	Current Account	
Account Holder*(Self)	TECHCARE SOLUTION	
Account Holder Name*	TECHCARE SOLUTION	
Account No.*	151202000000235	
IFSC Code*	IOBA0001512	
Bank Name*	Indian Overseas Bank	
Branch Name*	Shastri Nagar, patna	

Proof / Identification Details:-

PAN No.*	AAMFT3425A
GSTIN No.*	10AAMFT3425A1ZD

Address Details :-

Address Line 1*	Beltron, Bhawan
Address Line 2*	Shastri Nagar, Patna
State*	Bihar
District*	Patna
PIN*	800023