



DEALERSHIP APPLICATION FORM

1. NAME OF THE APPLICANT :

2. DETAILED POSTAL ADDRESS :
(INCLUDING DISTRICT & PIN CODE)

TELEPHONE NUMBER WITH STD CODE :

MOBILE NUMBER :

E-MAIL ID :

3. IS YOUR FIRM

NEW []

EXISTING []

4. BUSINESS HISTORY

a) PRESENT BUSINESS :

SR.NO.	MANU / SUPPLIER	SINCE YEAR	PRODUCTS	ANNUAL TURNOVER	TRADE DISCOUNT %

b) DETAILS OF PRESENT MANAGERIAL AND SALES STAFF :

SR. NO.	NAME & POSITION	QUALIFICATION	NO. OF YEARS EXPERIENCE	SALARY	PRODUCT HANDLED	RESPONSIBILITY

c) DETAILS OF OFFICE STAFF :

SR. NO.	NAME & POSITION	QUALIFICATION	NO. OF YEARS EXPERIENCE	SALARY	WHAT RESPONSIBILITY



d) STAFFING : THE NUMBER OF SALES AND OFFICE STAFF SHALL DEPEND ON THE POTENTIAL OF THE AREA.

SR. NO.	POSITION	PROPOSED SALARY	% COMMISSION ON SALES

5. CONSTITUTION OF THE FIRM

SR. NO.	NAMES OF PROPRIETOR/ PARTNERS/DIRECTORS	RELATIONSHIP	AGE	QUALIFICATION	%SHARE IN PARTNERSHIP	INVOLVEMENT IN FIRM

6. LAST 3 YEAR TURNOVER

I.

II.

III.

GST CERTIFICATE

GST NO..... DATED

CST NO..... DATED

7. BANK DETAILS :

**8 BUSINESS CONTACTS :**

(Please give Names and address of your references below)

SR. NO.	INSTITUTION	NAME OF PERSON	DESIGNATION

9. REFERENCES :

SR. NO.	NAME	ADDRESS	OCCUPATION

- Can we contact your Bankers for reference ? Yes / No
- Can we contact your Business contacts for reference ? Yes / No
- Can we contact your references for reference ? Yes / No

I/We agree that the information given in the application for is correct and complete. I/We agree and accept that at any given point of time if it is found that the information provided by me/us is not correct or have concealed the information then my/our dealership stands cancelled without prejudice to our rights under the agreement.