



APPLICATION FORM

Location Required: _	oaste	paste a size
District:		Pohotolican
	. 95	_
	NOW YOU APPROACHED US?	
(A) News Paper Advt. :	Name of News PaperDate :	
(B) Reference. :	Name of Reference.	
	DETAILS OF THE APPLICANT:	
1. Name of the applic (IN BLOCK LETTER:	ant: Mr.IMrs.IMs.IMIs.	
 Father's/Husband's Permanent Address 		
3. Permanent Addres		
3. Permanent Addres	s	
3. Permanent Addres	s Pin Code	
3. Permanent Addres	s Pin Code	

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5.	DOB: (00, MM, YY)		
6.	Details about your profession and income:		
a)	Are you a businessman Service Professional		
b)	b) Yourannual incometurnover Rs. ————————————————————		
c)	c) Your investment capacity:		
. ,			
7. Please provide details about your business.			

8. If the Distributorship is allotted to you, how much time you need to invest?

7days 15 days 30 days

I hereby certify that all the information given by me in this form is true & if found false the Company May Cancel my allotment (if allotted) as per its policy in force.

DECLARATION

Date: _____

Signature