**DEALER APPOINTMENT APPLICATION FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Company / Business Information | | | | |  | | | | | | | |
|  |  | Business Name : | | | | …………………………………………………………………………… | | | | | | | |
|  |  | Registered Address : | | | | …………………………………………………………………………… | | | | | | | |
|  |  | Business Registration No : | | | | …………………………………………………………………………… | | | | | | | |
|  |  | Date of Registration | | | | …………………………………………………………………………… | | | | | | | |
|  |  | Type of Business: | | Sole Proprietor | | | | | Partnership | | | Private Ltd | Other ……………… |
|  | Contact Details | | | |  | | | | | | | | |
|  |  | Contact Person : | | | ……………………………………………….. | | | | | | | | |
|  |  | Designation: | | | ……………………………………………….. | | | | | | | | |
|  |  | Mobile No: | | | ……………………………………………….. | | | | | | | | |
|  |  | Telephone No: | | | ……………………………………………….. | | | | | | | | |
|  |  | Email: | | | ……………………………………………….. | | | | | | | | |
|  |  | Website (if any) | | | ……………………………………………….. | | | | | | | | |
|  | Business Profile | | | | | | | | | | | | |
|  |  | Nature of Business: | | | | | ……………………………………………….. | | | | | | |
|  |  | Year in Operation: | | | | | ……………………………………………….. | | | | | | |
|  |  | Current Product Lines Handled: | | | | | ……………………………………………….. | | | | | | |
|  |  | Number of Employees : | | | | | ……………………………………………….. | | | | | | |
|  |  | Annual Turnover: | | | | | ……………………………………………….. | | | | | | |
|  |  | Market Coverage Area: | | | | | ……………………………………………….. | | | | | | |
|  | Proposed Products to Deal  (Please tick relevant) | | | | | |  | | | | | | |
|  |  | | Air conditioners | | | |  | | | | | | |
|  |  | | Household Appliances | | | |  | | | | | | |
|  |  | | Consumer Electronics | | | |  | | | | | | |
|  | STC | |  | | | |  | | | | | | |
|  | Infrastructure Details | | | | | | | | | | | | |
|  |  | | No of Outlets | | | | Yes | | | | No | | |
|  |  | | No of work House facility | | | | Yes | | | | No | | |
|  |  | | No of Delivery Vehicle | | | | Yes | | | | No | | |
|  |  | | Showroom Facility | | | | Yes | | | | No | | |
|  |  | | No of staff | | | | Yes | | | | No | | |
|  |  | | Sales Rep facility | | | | Yes | | | | No | | |
|  | References | | | | | | | | | | | | |
|  |  | | Existing Dealership or Brand represented | | | | | | | ……………………………………………………………………........... | | | |
|  |  | | Any prior dealing with our organization | | | | | | | ……………………………………………………………………........... | | | |
|  | Documents to attach mandatory | | | | | | | | |  | | | |
|  |  | | Copy of Business Registration | | | | |  | | | | | |
|  |  | | VAT/TAX Registration Copy | | | | |  | | | | | |
|  |  | | Bank Details letters | | | | |  | | | | | |
|  |  | | Company profile | | | | |  | | | | | |
|  |  | | Trade Reference | | | | |  | | | | | |

I hereby certify that the above information is true and correct to the best of my knowledge. I understand that false or misleading information may lead to rejection or cancelation of the dealership.

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Signature of Applicant Date