

Photo

KYF 2023 of Franchisee

1. PERSONAL DETAILS

a) Full Name of the Franchisee: 1) _____

2) _____

b) Date of Birth: Applicant No. 1) _____

Applicant No. 2) _____

c) Residential address of 1st applicant: _____

Dist _____ State _____ Pin code _____

Res Tel No with STD Code _____ Mobile Number _____

d) Address of Office / Godown: _____

Dist _____ State _____ Pin code _____

Office Tel No with STD Code _____

Mobile Number _____

Email: _____

Franchisee finalized for destination/area/city :-

2. BUSINESS PARTICULARS

- a) Name of your Agency/ Firm : _____
- b) Type of Business : Only delivery [] Booking & Delivery [] Only Booking []
- c) AGC joining year :-
- d) Transhipment to company monthly basis (In rs.) :-
- e) What other business are you engaged in presently & since when?
- _____
- _____
- f) Goods & Service tax (GST) registration No / status (attach copy of registration)
- _____
- g) Available Infrastructure:
- i) Office area in Square feet : _____
- ii) No. of computers in your office? _____
- iii) No. of employees _____
- iv) No. of printers & scanners _____
- v) No. of Vehicles for service / delivery?
- a) Two wheelers _____ Make : _____
- b) Three / Four Wheelers _____ Make : _____
- vi) Your business per month ---

Pincodes & name of areas that you deliver in your city.

Pincodes & names of cities/villages/centers that are delivered via your city.

Kindly attach photo of your office with the AGC sign board and yourself:

Date: _____

Place: _____

Stamp of Firm

Sign

PHOTOGRAPS OF PREMISES

