Application for Dealership

Date: _____

Applicant firm: _____

Owner name and mobile: _____

Address: _____

GSTIN and PAN: _____

Capacity

Item	Details
Shop area	
Godown area	
Delivery vehicles	
Salesmen	
Shops served now	
Money that can be put in	

Territory and products

Territory sought: _____

Products sought: _____

Present yearly turnover: _____

References

Bank: _____

Two suppliers with contact: _____

I agree that sending this form does not by itself appoint me as a dealer.

Signature and stamp: _____