



DEALERSHIP APPLICATION FORM

1. Name of the Dealer :

a) Address of the Dealer:

.....

b) Phone No. (With STD code):..... c) Mobile No:

d) E- mail:

2.Dealer Registration Details (With Self Attested Copies) :

(a) Company PAN_____ (b) GSTIN :_____

C. Company TAN _____

3. Details of Bank A/c. :

a) Name & Address of Bank:

b) Branch Code

c) Account No. :.....

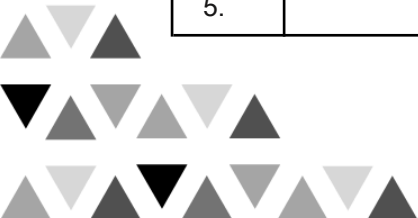
d) IFS Code.....

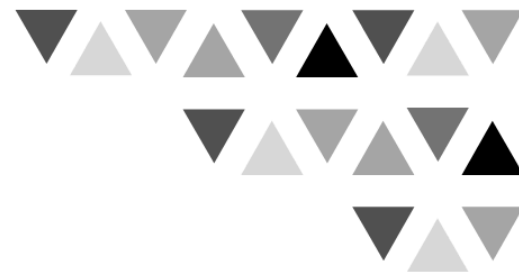
e) Name of Authorised Signatory:

f) Contact Number of Authorized Signatory

4. Existing Business Details :

| S. No | Company Name | Associated Products | Annual Turnover (In Lacs) | Year of association |
|-------|--------------|---------------------|---------------------------|---------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |





5. Status of Firm (tick): Proprietorship/Partnership/LLP/Private Ltd. Co.

6. Details of Proprietor/Partners/Directors:

Name /Designation/DIN Details/ DIN Year

| | | | | |
|---|--|--|--|--|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

7. Details of Security Deposit (In INR)

a) Blank Security Cheques (Minimum Two Cheques & Its Nos):

b) Bank Details:

8. Last Three (3) years turnover of your Firm (in INR Lacs/Cores)

(I)..... (ii)..... (iii).....

9. Please indicate how much you wish to invest in this dealership (in INR Lacs):

10. Expected minimum sales per month:

11. Minimum assured premium display space (SIS/Exclusive in SQFT).....

12. Billing Address:.....

13. Warehouse Address:.....

Date:

Place:

For MetaXperia Home Solutions

Dealer Firm Seal

Name & Signature of Sales Head
Mobile Number

Name & Signature of Dealer
Mobile Number

Approved By
Name & Signature of Senior Management
Mobile Number



MetaXperia
Home solutions

+91 80358 47387
www.wekraft.in
contact@wekraft.in



To,

METAXPERIA HOME SOLUTIONS LLP,

DECLARATION

I/We do hereby declare that the information furnished herein is correct to the best of my/our knowledge and belief. For any incorrect information/mis-information furnished herein and for non-compliance of company's policies formulated from time to time,

I/We agree that:

- 1) The Company shall have the absolute right to reject my/our application for appointment as dealer.
- 2) The Company reserves the right to terminate my/our dealership without any notice and assigned any reason whatsoever.
- 3) The Company shall have the right to forfeit or adjust the whole or part of my/our Security Deposit with them in the manner they may deem fit.

Signature of the applicant(s)

(With rubber stamp)

Date:

Place:



MetaXperia
Home solutions



+91 80358 47387
www.wekraft.in
contact@wekraft.in



FOR OFFICE USE ONLY
(Assessment Cum Approval / Rejection Form)

Application form No:

ERPNext Code:

1. Location of business/premises:

2. Godown capacity :

(a) Area in sq. feet: (b) Capacity in Bags / Boxes:.....

(c) Construction: Permanent/Temporary

3. Experience and capability :

4. Financial standing and capability to invest (In INR):

5. Market reputation and credibility : Excellent/Very good/Good/Average Poor

6. Business potential of the party: (Estimated Sales/Month in INR):

7. Total market potential of the area: /month in INR

8. Assurance of minimum turnover: /month in INR

9. Approximate number of competitors stockists in the area/town (major competitors):

10. No. (Name of the dealer):

11. Interests and hobbies of the dealer:.....

12. Special Achievement:

13. Credit limit (In INR Lacs)

Reasons for Approval / Rejection of Dealership.....

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.....

.....

Signature:

Name:

