EMPANELMENT OF DIRECT SELLING AGENCY (DSA)

APPLICATION FORM (to be typed in the Institution's Letterhead)

1.	Name of the Institution	:		
2.	Nature of Constitution	:	Public Limited Company / Private Lin	
3.	Business Office Address	:	Company /Partnership Firm / Propriet	orsnip Firm
4.	Telephone Nos. Mobile Nos.	:		
5.	Nature of Business	:	(Profile to be attached separately)	
6.	No. of years in the Business	s :		
7.	No. of Employees on Roll	:		
8.	No. of Clients in your database. Individual Clients b. Corporate Clients	:	(give list separately)	
	 a. Name of the Instituing b. Nature of Product must c. Period of such work d. No. of Cases/Accounce e. Quantum of business f. Whether the activity 	coans on/Barker arker ande nts pr s (Ar	, Credit Cards, Others (specify)] ank/Others : ted : ertaken : rocured : nt. involved) : ontinuing. :	
	No. of clients you intend to			:
	Estimated No. of clients you	•	•	:
12.	How many persons you inte	end to	allocate for Housing loan marketing	:
13.	Give your brief Business Placet (attach separate sheet, necess	an/St ssary)	rategy for marketing housing loans	:
14.	Any other information.			

Sign of the Authorised Signatory/Name/Designation
Date: with Seal of the Institution

Place: