

FRANCHISEE REGISTRATION FORM

Please see the instructions on the last page, while completing this form

Section 1: Company Details & General Information

1. Name Of Company:

2. Street Address:

City:

PIN Code:

Country:

3. Address For Correspondence:

4. Tel:

5. Fax:

6. Email Address of Contact Person:

7. Website:

8. Contact Name & Title:

Mobile No:

9. Type Of Business (Mark One Only):

Corporate/ Limited: ☐

Partnership: ☐

Other (Specify):

10. Year Established:

11. Number of Full-time Employees:

12. Licence No./ State Where Registered:

13. VAT No./ TIN/ Tax ID:

Service Tax No./ Excise No:

Section 2: Financial Information

14. Annual Value Of Total Sales For The Last 3 Years:

Year ____: Rs. _____ Year ____: Rs. _____ Year ____: Rs. _____

15. Bank Name:

Swift/BIC Address:

Address:

16. Bank Account Number:

17: Account Name:

Section 3: Technical Capability & Information On Goods / Services Offered

18. Quality Assurance Certification (e.g. ISO 9000 Or Equivalent) (Please Provide A Copy Of Your Latest Certificate):

Section 4: Infra-structure Available

19. Retail/ Showroom Space:

Location:

Area (sq. ft.): _____

20. Warehouse/ Godown Space:

Location:

Area (sq. ft.): _____

Section 5: Personal Information

21. Residential Address:

Telephone No:

Birthday:

Anniversary Date:

22. **Certification:**

I, the undersigned, hereby confirm that the information provided in this form is correct, and in the event of changes details will be provided as soon as possible:

Name:

Functional Title:

Signature: _____

Date: _____

Please Mail Completed Form To:

**ARISE INDIA LIMITED,
B-38, JAIN CHOWK,
MANGLA PURI, PALAM,
NEW DELHI – 110045, INDIA.**

Attn: Commercial Department

For Office use only:

Franchisee Registration No:

Franchisee Code:

Head – Commercial Dept.

Manager-Finance & Accounts

Managing Director

INSTRUCTIONS FOR COMPLETION

The form should be typewritten in uppercase and completed clearly and accurately ensuring that all questions are answered. The numbers below correspond to item numbers on the registration form:

1. *Full name of company*
2. *Full street address*
3. *Full mailing address (including P.O. Box, if any)*
4. *Telephone number, including correct country and area codes*
5. *Fax number, including country and area codes*
6. *Email address of the person who should be contacted regarding franchise formalities/ information or other questions relating to your company*
7. *www address*
8. *Provide name of person (including title) or department to who correspondence should be addressed*
9. *Please tick one box. If the last box is ticked, please specify*
10. *Indicate the year in which the organisation was established under the name shown in Item 1*
11. *Indicate the total number of full-time personnel in the company.*
12. *Provide the licence number under which the company is registered, or the State where it is registered.*
13. *Provide the VAT number or Tax ID of the company.*
14. *Provide the total annual sales for the organisation for the last 3 financial years in Indian Rupees*
15. *Provide the full name, address and SWIFT address of the bank used by the company.*
16. *Provide the company's bank account number*
17. *Provide the name under which the account is being operated.*
18. *List any Quality Assurance Certificates (e.g. ISO 9000 series) that have been issued to your company and provide a copy of the latest certificates.*
19. *Provide details of Retail/ Showroom space available and indicate whether owned or leased. Indicate the available carpet area of available space.*
20. *Provide details of Warehouse/ Godown space available and indicate whether owned or leased. Indicate the available carpet area of available space.*
21. *Provide Personal details including Residential address, telephone nos., Birthday and Anniversary dates.*

The form should be signed by the person completing it and their name and title should be typed, along with the date.