



## Authorised Dealership Opening Form

Firm Name : \_\_\_\_\_

Person Name : \_\_\_\_\_

Contact No. : \_\_\_\_\_

State : \_\_\_\_\_

**Arose seeds pvt. ltd.**

7, 2<sup>nd</sup> Floor, Gold Plaza, B/h. D Mart, Sector-26,  
Gandhinagar-382028 (Gujarat State)

Mobile : 94262 58523

e-mail : [aroseseeds@gmail.com](mailto:aroseseeds@gmail.com) / Website : [www.aroseseeds.com](http://www.aroseseeds.com)

**Arose** seeds for a better life



15. Postage/Courier Choice If Any :- \_\_\_\_\_

16. Credit Worthiness of Party-Good/Fair/Best :- \_\_\_\_\_

17. Proposed Credit Limit If Any (Yearly) \_\_\_\_\_

I/WE INFORM THAT THE INFORMATION FURNISHED ABOVE IS TRUE AND CORRECT TO  
THE BEST OF MY/OUR KNOWLEDGE AND BELIEF AND  
I/WE HAVE GONE THROUGH ALL THE DETAILS MENTIONED ABOVE.

18. Document Attach :-
- 1) 2 - Passport Photo
  - 2) Seeds License Copy
  - 3) PAN card copy
  - 4) VAT/TIN registration copy
  - 5) Residence Proof
  - 6) Dealership Agreement (Stamp Rs. 100/-)

19. Date / दिनांक :- \_\_\_\_\_

Name & Signature of Proprietor / Partner / Director  
of Firm With Seal / हस्ताक्षर (स्टैम्प के साथ)

20. Place / स्थल :- \_\_\_\_\_

### PERSONAL DETAILS

1. Name Of The Partner (First) :- \_\_\_\_\_

Date Of Birth :-       PAN No.    -    -

Address :- \_\_\_\_\_

City :- \_\_\_\_\_ Pin :-       Dist :-

State :-       Phone Resi :-       Extn :-

Mobile :-           E-Mail :- \_\_\_\_\_

Signature :- \_\_\_\_\_

2. Name Of The Partner (Second) :- \_\_\_\_\_

Date Of Birth :-       PAN No.    -    -

Address :- \_\_\_\_\_

City :- \_\_\_\_\_ Pin :-       Dist :-

State :-       Phone Resi :-       Extn :-

Mobile :-           E-Mail :- \_\_\_\_\_

Signature :- \_\_\_\_\_

Name of S.R./ A.M./ R.B.M. :- \_\_\_\_\_

Comments of :- \_\_\_\_\_

Signature :- \_\_\_\_\_