



# **DEALERSHIP APPLICATION**



**A. BASIC INFORMATION:-**

**1. Details of Firm (Existing):-**

1.1	Name of Firm	:-		
1.2	Name of Prop./ PRTNR/DIRECTOR	:-		
1.3	Address	:-		
1.4	Tel. Nos.	:-	Office	
			Workshop	
			Residence	
			Mobile No.	
1.5	Fax	:-		
1.6	E-Mail Address	:-		
1.7	Nature of Firm (Please Tick)	:-	Public Ltd.	
			Private Ltd.	
			Proprietary	
			Partnership	
1.8	Date Of Establishment	:-		
1.9	Weekly Off	:-		

**2. Business Experience:-**

Sr. No.	Name of Franchise / Product	Period	Annual Turnover In Previous Financial Year	Responsible Person
01				
02				
03				
04				

**B. ATUL AUTO LTD. DEALERSHIP PROPOSAL:-**

**1. Details of Proposed Firm:-**

1.1	Name of Firm	:-		
1.2	Address	:-		
1.3	Contact Nos.	:-	Office:-	
			Workshop:-	
			Mobile :-	
1.4	Fax	:-		
1.5	E-Mail Address	:-		
1.6	Nature of Firm (Please Tick)	:-	Public Ltd.	
			Private Ltd.	
			Proprietary	
			Partnership	
1.7	Tin No.	:-		
1.8	GST No.	:-		

**2. Proprietor/Partner's/Directors Details:-**

<u>Sr. No.</u>	<u>Name of Owner / Partner / Director</u>	<u>% Share Holding</u>	<u>Experience in Years</u>	<u>Contact Nos.</u>

### 3. Facilities for ATUL AUTO LTD. DEALERSHIP:-

<u>Facility</u>	<u>Existing</u>	<u>Proposed</u>
Address of Show-Room		
Address of Workshop		
Area of Showroom (In Sq. Ft.)	Sq. Ft.	Sq. Ft.
Frontage of Showroom (In Ft.)	Ft.	Ft.
Area of Workshop (In Sq. Ft.)	Sq. Ft.	Sq. Ft.
Height of the Workshop	Ft.	Ft.
Own or Rented (Please Tick)	<input type="checkbox"/> Own <input type="checkbox"/> Rented	<input type="checkbox"/> Own <input type="checkbox"/> Rented
Workshop is Attached with Showroom OR Separate	<input type="checkbox"/> Attached <input type="checkbox"/> Separate	<input type="checkbox"/> Attached <input type="checkbox"/> Separate
If Separate, Then Distance from Showroom (In Kms.)	Km	Km

### 4. Proposed Investment in ATUL AUTO LTD. Dealership:-

4.1	<u>Facilities</u>		<u>Rs. (In Lacs)</u>
a)	Showroom	:-	
b)	Workshop	:-	
c)	Working Capital	:-	

4.2	<u>Source of Investment</u>		<u>Rs. (In Lacs)</u>
a)	Own Resources	:-	
b)	Bank Loan	:-	
c)	Others (Please Specify)	:-	
TOTAL		:-	

**C. MARKET ESTIMATE:-**

**1. Market Potential and Size:-**

Total 3-Wheeler Population in the Town: - \_\_\_\_\_

3-Wheeler Industry in the Territory:-

Sr. No.	Name of Dealership	Brand	Range of Products	Average Units Sold Per Month *		
				Pass.	Goods	TOTAL
		Piaggio				
		M&M				
		Bajaj				
		Others				

\* Please furnish above details as per RTO Records.

Total 4-Wheeler LCV Population in the Town: - \_\_\_\_\_

4-Wheeler LCV in the Territory:-

Sr. No.	Name of Dealership	Range of Products	Average Units Sold Per Month *		
			Pass.	Goods	TOTAL

\* Please furnish above details as per RTO Records.

**2. Popular Mode of Public Transport in Your Territory:-**

<u>PASSENGER</u>	<u>GOODS</u>

**3. Likely Potential for Our Range of Products (Per Month):-**

<b>GOODS</b>	
<b>PASSENGER</b>	

Company Seal

(Signature of the Key Person)

Name :- \_\_\_\_\_

Date :- \_\_\_\_\_

**Photographs of Proposed Showroom**

**\*EXTERIOR VIEW OF THE SHOWROOM SHOWING MAIN ROAD (2 PHOTOS)**

**\*INTERIOR VIEW OF THE SHOWROOM (2 PHOTOS)**

**Photographs of Proposed WORKSHOP**

**\*EXTERIOR VIEW OF THE WORKSHOP (2 PHOTOS)**

**\*INTERIOR VIEW OF THE WORKSHOP (2 PHOTOS)**

## Proprietor/Partner/MD Profile

<b>Proprietor/Partner/MD Profile</b>				
Full Name:-				
Mobile No:-		Please Affix Recent Passport size Photograph (Do not Staple)		
Email ID:-				
Official Contact No:-				
Residential Contact No:-				
Current Firm Name				
Designation in Current Firm				
% holding in Current Firm				
Residential Address:-				
Business Address:-				
<b>Personal Details</b>				
Date of Birth				
Religion				
Nationality				
Languages Known				
Marital Status				
Date of Anniversary, If Married				
Favourite Holiday Spots				
Hobby:-				
<b>Professional Details</b>				
Business Exposure:-				
Name of firm		Dealing Products	Position	From To
<b>Family Details</b>				
NAME		Date of Birth		NAME Date of Birth
Any Other Information Would You Like To Share:-				
Declaration: - I confirm the above information furnished is correct and true to my knowledge.				
SIGNATURE				DATE
<b>Note – The above information will not be shared and will be kept confidential for official use only. Kindly feel sepretaly for each partners</b>				

## Key Person Profile

<b>Name:-</b>			
<b>Mobile No:-</b>		<b>Please Affix Recent Passport size Photograph (Do not Staple)</b>	
<b>Fax No:-</b>			
<b>Email ID:-</b>			
<b>Official Contact No:-</b>			
<b>Residential Contact No:-</b>			
<b>Designation in Proposed Firm</b>			
<b>% holding in Proposed Firm</b>			

<b>Residential Address:-</b>	
<b>Work Address:-</b>	

### Personal Details

<b>Date of Birth</b>	
<b>Languages Known</b>	
<b>Marital Status</b>	
<b>Hobby:-</b>	

### Professional Details

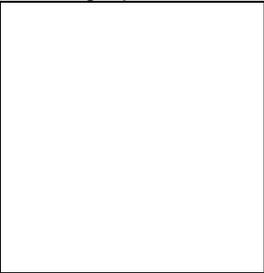
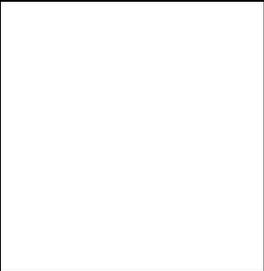
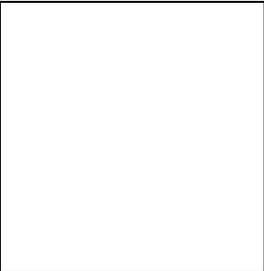
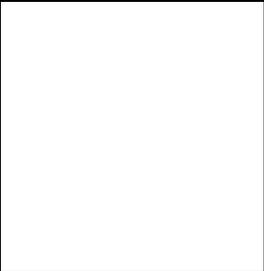
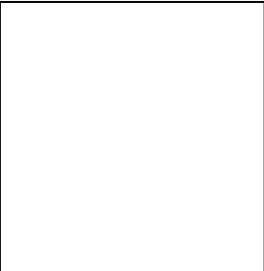
<b>Business Exposure:-</b>				
Name of firm	Dealing Products	Position	From	To

**Any Other Information Would You Like To Share:-**

**Declaration: - I confirm the above information furnished is correct and true to my knowledge.**

Signature	Date
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**Details of Proprietor / Partner / Director with Photograph**

Name of Proprietor / Partner / Director	Age	Sign	Photograph
i) _____	_____	_____	
ii) _____	_____	_____	
iii) _____	_____	_____	
iv) _____	_____	_____	
v) _____	_____	_____	

## Data Requirement for CIBIL Verification

NAME OF APPLICANT	
DATE OF BIRTH (dd/mm/yy)	
PAN CARD NUMBER	
DRIVING LICENCE NUMBER	
MOBILE NUMBER	
TELEPHONE NUMBER WITH STD CODE	
RESI - ADDRESS	
PINCODE NUMBER	
OFFICE ADDRESS	
PINCODE NUMBER(compulsory)	
BANK A/C NUMBER	
<b>Notes:-</b>	
1. All the information mentioned above is mandatory to fill	
2. If the firm is an Existing Proprietorship Firm, fill firm's Proprietor details on above format	
3. If the firm is an Existing Partnership Firm, fill firm's details on above	
4. If the firm is a New Partnership Firm, fill above format for each partner separately	

Please Enclosed following Documents with this Dealership Application Form

Sr.No.	Particulars	Enclosed	
		YES	NO
1)	Brief profile of the firm and that of the partners		
2)	Detailed lay-out drawing of the proposed show-room & workshop infrastructure being offered to ATUL AUTO LTD.		
3)	Location map of the showroom & workshop infrastructure.		
4)	General view photographs showing front view of the showroom, vehicle display area and office block along with photographs of the workshop area (both covered & open)		
5)	Copy of property deed (if owned) or lease agreement (if on rent)		
6)	Copy of firm's partnership deed / company's memorandum & articles of association / registration certificate in case of Sole proprietorship business, as applicable.		
7)	Copy of past two year's audited accounts (balance sheet & profit & loss statements)		
8)	Copy of the last assessment order.		
9)	Copies of GST Nos. certificates.		
10)	Copy of trade certificate (in case of existing automobiles dealer)		
11)	Letter from bank confirming party's credentials & willing to provide CC for ATUL AUTO business.		
12)	Letter from the applicant firm confirming that he is willing to comply with norms in regards to requirements as to infrastructure, manpower systems, finance deployment, etc. as may be announced from time-to-time.		
13)	Copy of pan card		

**FOR OFFICE USE ONLY**

Acknowledgement Slip (To be sent form Head Office)

Name & Address

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Dear Sirs / Madam

This has reference to your Application regarding the Dealership at \_\_\_\_\_

We acknowledge the receipt.

Reference Code

--	--	--	--	--	--	--

Dated

--	--

D D

--	--

M M

--	--

Y Y

Please mention above reference Code for further correspondence.

Thanking You,

Yours Faithfully,  
For, ATUL AUTO LIMITED

Dealer Development