

APPLICATION FORM

To be filled in by those in business:

Company Name(s)	Proprietary/ Partnership/ Private Ltd./ Public Ltd.	Nature of Business	Products / Services offered	Years in Business	Number of People Employed	Turnover (Rs.)
						Last 3 Years

3. Does your professional background involve any of the following? (Please tick the appropriate box)

- | | | | |
|-------------------------|--------------------------|-----------------------------|--------------------------|
| 1. Marketing/Sales | <input type="checkbox"/> | 2. Health Care | <input type="checkbox"/> |
| 3. Education/Training | <input type="checkbox"/> | 4. Profit Center Management | <input type="checkbox"/> |
| 5. Small Business Mgmt. | <input type="checkbox"/> | 6. Other (Specify) | <input type="checkbox"/> |

4. Are you currently associated with any professional group/association? Yes No

If yes, give details: _____

SECTION II: THE PROPOSED CENTRE

1. How do you propose to set up the Business?

- | | | | | | |
|----------------|--------------------------|-------------|--------------------------|-----|--------------------------|
| Business Asso. | <input type="checkbox"/> | Distributor | <input type="checkbox"/> | SMF | <input type="checkbox"/> |
| DMF | <input type="checkbox"/> | RMF | <input type="checkbox"/> | C&F | <input type="checkbox"/> |

Is the Dealership/Distributorship/DMF/C&F/Already in existence?

- a) Yes No

If yes, what is the name of the Business/Firm/Company _____

2. City Town where you propose to setup the new venture _____
located in the state of _____

3. When do you propose to setup the new venture?

- Immediately Within next 1months Next 2 to 5 months

4. Do you already possess a site?

- Yes No

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5. If no, do you have a site in mind?

Yes No

6. Please give details of the site:

Nature of Agreement* Ownership/ Rental/Long Term Lease	Period of Lease	Tiled/Carpet Area	Location: Commercial Area/ Residential Area (Address)
	From: _____ To: _____		

7. In case you do not have a site, do you plan to take on rent? Yes No

If yes, within how many months? _____

8. How much funds are you willing to invest?

10-99 K 01-20 Lacs More than 30 Lacs

9. What efforts/initiatives would you put in to make this business a success?

10. State reasons why Green Shakti Gauseva Pvt. Ltd. should consider you as a business partner.

Date: _____

Signature: _____

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MINUTES OF MEETING (MOM)

Location _____

Date: _____

M.O.M Between Green Shakti Private Limited-Name of the GSGSPL Representative _____
and Mr/Miss/Ms/M/s. _____ Represented by _____.

The minutes of understanding is being signed after the GSGSPL's business proposal explained to Mr. _____.

GSGSPL has clearly meant that only on acceptance of the following terms, the prospects application will be considered to be scrutinized for dealership/distributorship/any franchise at _____ dist.
This is drawn to favor both the parties for future business at _____ dist.

1. At discussed the prospect should be well versed with the assigned market/area to implement the GSGSPL's formatted business program.
2. Prospect should understand the Franchisee awareness are importance i.e., prospect is expected to redistribute thru the dealer/distributor channel: White good shops, Ayurvedic Products, FMCG items with other Divisions (Like Apparel, Bio-Magnetic Products, Footwear, Home Appliances, Herbal Products, Home Decor, Home, Care, Pooja Products, Construction Products, Agriculture Products, Electronics Products, etc.
3. Prospect is expected to have earmarked/dedicated display space in existing Showroom.
4. Prospect has been advised to hire quality manpower for both Marketing & Service.
5. Prospect is expected to involve by exhibiting eagerness in creating the brand awareness and personal involvement in promotional activities.
6. Prospect would not deal with competition or local brand FMCG items with other Divisions (Like Apparel, Bio-Magnetic Products, Footwear, Home Appliances, Herbal Products, Home Decor, Home, Care, Pooja Products, Construction Products, Agriculture Products, Electronics Products, etc. Agriculture Pumps while dealing with Green Shakti Gauseva Private Limited.
7. Prospect would provide quality & Timely services to customers at their locations as per GSGSPL policies.
8. Personal involvement should be there in developing the Green Shakti business.
9. Prospect is expected to carry working capital taking into consideration the current sales trend.
10. The area allocation in framing the territory is GSGSPL's discretion. The performance of all assigned areas would be reviewed on monthly basis, further to that if a corrective is needed; GSGSPL holds the liberty to reassign the said territory.
11. The Redistribution will be done as per the GSGSPL's laid norms and on the recommended price's only.
12. The prospect would adhere all the quality norms & procedures laid by GSGSPL.
13. Prospect is expected to reveal all business-related information's (includes sales, service & competition activity's) as and when required by GSGSPL.
14. GSGSPL financial mode of operation with the franchisee would be purely on "CASH & CARRY" basis only.
15. Prospect would equally share the cost on certain promotional activities after mutually agreed upon.
16. Prospect to source adequate Computer/printer/stationery the required equipment for providing quality services as advised by GSGSPL.
17. Minimum order quantity would have to be adhered as discussed and also adhere to monthly targets mutually agreed upon.

Prospect Signature _____

GSGSPL Representative _____

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GSGSPL BA (Dealership/Distributorship/DMF/RMF/C&F Approval Format

Branch Name	
Name of Short-Listed Applicants	
Name of the Authorized Signatory	
Name of Tehsil/Taluka/Block/District/s Allotted.	
Proposed date of commencement	
It is a New Franchisee territory/Location(Y/N)	
Or	
Replacement of existing Franchise(Y/N)	

The following documents have been enclosed:
(Please mention Y/N accordingly)

- | | | |
|--|--------------------------|--------------------------|
| a) Application form | <input type="checkbox"/> | <input type="checkbox"/> |
| b) Two Photograph of the Applicant | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Photograph of the frontage Showroom | <input type="checkbox"/> | <input type="checkbox"/> |
| d) Copy of Adhar card certificate | <input type="checkbox"/> | <input type="checkbox"/> |
| e) Copy of PAN card certificates | <input type="checkbox"/> | <input type="checkbox"/> |
| f) Copy of Bank Passbook/ enclosed cancel cheque | <input type="checkbox"/> | <input type="checkbox"/> |

Requested by : Marketing Executive	Recommended By : State Marketing Franchise
Verified by: Authorized Signature	Approved by: Authorized Signature