

# MESSENGER SOLAR

## Corporate Office

Narghat, Nandakumar, Haldia, Purba Medinipur, Pin -721633  
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| Super/Dealership Application Form |                             |   |       |                               |
|-----------------------------------|-----------------------------|---|-------|-------------------------------|
| DETAILS OF FIRM                   |                             |   |       |                               |
| 1                                 | Name Of Firm                |   |       |                               |
| 2                                 | Address                     |   |       |                               |
| 3                                 | Contact No.                 | Phone :   |       | Mobile :                      |
|                                   |                             | Fax :   |       |                               |
|                                   |                             | E-mail :  |       | Website :                     |
| 4                                 | Contact Person              |   |       |                               |
| 5                                 | Corporate Status            | Public Ltd. / Pvt. Ltd. / Partnership / Proprietary |       |                               |
| 6                                 | Functioning Since           |   |       |                               |
| 7                                 | GST No.                     |   |       |                               |
| FINANCIAL STANDINGS               |                             |   |       |                               |
| 1                                 | Capital Investment          | Total : Rs.   |       |                               |
|                                   |                             | Working Capital : Rs.                               |       |                               |
|                                   |                             | To be Invested : Rs.                                |       |                               |
| 2                                 | Name of the Bankers         |   |       |                               |
| 3                                 | Bank Account No.            |   |       |                               |
| 4                                 | C.C. Limit                  |   |       |                               |
| 5                                 | Sales Tax Registration      | Central :   |       |                               |
|                                   |                             | State :   |       |                               |
| 6                                 | Annual Turnover of the Firm |   |       |                               |
| 7                                 | Products Handled            | Product   | Brand | Monthly Avg. Sales (Last Yr.) |
|                                   |                             |   |       | Unit - Nos.                   |
|                                   |                             |   |       |                               |
|                                   |                             |   |       |                               |

|   |   |  |         |                       |
|---|---|--|---------|-----------------------|
| 8   | Any other business                                      |  |         |                       |
| <b>SERVICING SET-UP</b>   |   |  |         |                       |
| 1   | No. of Mechanics/Electricians                           |  |         |                       |
| 2   | No. of Mechanics experienced in Servicing of Appliances |  |         |                       |
| <b>SALES POINT</b>  |   |  |         |                       |
| 1   | Location  | Residential / Wholesale Market / Retail Market / Main Road |         |                       |
| 2   | Size  | Frontage :   | Depth : |                       |
|   |   | Total Area :   |         |                       |
| <b>STOCK POINT</b>  |   |  |         |                       |
| 1   | Do you have own godown                                  | Within / Away from sale point                              |         |                       |
| 2   | Location  |  |         |                       |
| 3   | Size  | Width :  | mtrs.   | Total Area : Sq.mtrs. |
| 4   | Name of the Transporter                                 |  |         |                       |
| <b>RELATIVES IN THE COMPANY, IF ANY</b>   |   |  |         |                       |
| Sl.No.  | Name  | Designation  | Address | Relationship          |
| 1.  |   |  |         |                       |
| 2.  |   |  |         |                       |
| <p><b>DECLARATION</b></p> <p>I / we certify that the foregoing information is correct and complete to the best of my / our knowledge and belief and nothing has been concealed. If at any time, I / we have concealed any material / information or given any false details, our appointment shall be liable to summary termination without notice or compensation.</p> <p><b>DATE :</b></p> <p><b>PLACE :</b></p> <p style="text-align: center;"><b>(SIGNATURE / SEAL OF APPLICANTS)</b></p> |   |  |         |                       |