

PARTNERSHIP AGREEMENT

For: [Sole Proprietorship Name]

Date: March 24, 2025

****PARTNERSHIP AGREEMENT****

****THIS PARTNERSHIP AGREEMENT**** ("Agreement") is made and entered into on this [Date], by and between the following parties:

1. **PARTIES**

- [Sole Proprietorship Name], a Corporation registered in the Healthcare industry under the laws of Chhattisgarh, having its principal place of business at [Address] ("Partner 1").
- [Name of Second Partner], a Corporation [or individual, if applicable] registered under the laws of Chhattisgarh, having its principal place of business at [Address] ("Partner 2").

2. **FORMATION OF PARTNERSHIP**

- The parties hereby agree to form a partnership for the purpose of collaborating in the Healthcare industry within the state of Chhattisgarh.

3. **TERM**

- This Agreement shall commence on [Date] and shall continue until terminated by mutual agreement of the parties or as otherwise provided herein.

4. **DISTRIBUTION OF PROFITS AND LOSSES**

- Profits and losses of the partnership shall be shared equally between the partners unless otherwise agreed upon in writing.

5. **MANAGEMENT AND CONTROL**

- The management and control of the partnership business shall be equally vested in Partner 1 and Partner 2.

6. **CAPITAL CONTRIBUTION**

- Each partner shall contribute an initial capital amount of [Amount] for the operation of the partnership business.

7. **DISSOLUTION**

- In the event of the dissolution of the partnership, assets shall be distributed in accordance with the Chhattisgarh Partnership Act and any agreements signed by the parties.

8. **BINDING EFFECT**

- This Agreement shall be binding on the parties, their heirs, successors, and assigns.

9. **DISPUTE RESOLUTION**

- Any disputes arising out of or relating to this Agreement shall be resolved through arbitration in accordance with the laws of Chhattisgarh.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the date first above written.

Signature: _____ Date: _____

****Partner 1**** (Printed Name: [Name])

Signature: _____ Date: _____

****Partner 2**** (Printed Name: [Name])