FORMAT FOR APPLICATION FOR CHANNEL PARTNER

SI. No.	Particulars	Details	
1	Name and full address of the Organization / Individual		
2	Type of Channel Partner Applying For		
3	Management Structure (Partnership /Limited /LLP)		
4	Contact Person with Designation		
5	Contact telephone numbers /Mobile No.		
6	Email ID		
7	Current operational areas of work		
8	Approval/Registration with any Govt./Agency (enclose supporting documents)		
9	Enlistment with any organization for similar work (enclose supporting documents)		

10	Annual turnover for Organisation the last 3 years (enclose supporting documents)	2019-20	2020-21	2021-22
11	Regular manpower available on roll for proposed work along with their age, qualification and experience			
12	Details of expertise available in Sale / Service of Machine Tools in domain (specify domain)			
13	Any other credentials in the subject area (enclose supporting documents)			
14	Acceptance of terms and conditions			

Signature of the	:

Authorized Signatory:

Name:

Designation:

Office Stamp:

PS: (i) All documents as per checklist to be attached with signature on each sheet
(ii) Additional sheets for details for above may be attached with signature on each sheet