

Details of Franchisee

Name of the Person /Firm/Comp	oany: -					
Address: -						
Contact No.:						
Email Id :						
Proprietor/Partners / Directors D	Details:-					
(1)						
Name						
Address		Photo				
Age						
PAN No						
Qualification						
(2)						
Name						
Address		Photo				
Age						
PANNo						
Qualification						

Name							
Address							Photo
Age							
PAN No							
Qualification							
Shop Establish	ment						
No and Date	illelit						
PAN Number							
Service Tax Nu	mher						
Service Tax Ivu	IIIDEI						
Experience in f	ield of 1	Tours and	Travel :-				
Details of the p	oremise	s :-					
(If office set up 500 sq. Feet or then areashou	more,	and if offic	ce is in ot	her than	_		
Ownership: - C	opy of S	Sale Deed					
Rent Agreeme	nt: - Coi	ov of Rent	. Agreem	ent (valid	up to 3 ve	ar)	
		- , - : : : : : : : : : : : : : : : : :	-00	(- - ,	
Why Shakti Tra	avels?						

Authorization:-					
(Signature of Authorized Signatory)					
Name:					
Designation:-					
Date:/					
Place:					

Please attach copies of the following documents as applicable.

- 1. Photo Copy of Pan card of Applicant
- 2. Photo Copy of Aadhar card of Applicant.
- 3. Photo Copy Service tax number of applicant.
- 4. Photo copy of shop establishment number and validity.
- 5. Photo copy of Partnership deed / Memorandum of Association.
- 6.Photo Copy of Sale Deed or Rent Agreement of Office Premises.

NOTE :- FILL UP THE FORM AND SUBMIT AT BELOW MENTION ADDRESS WITH ALL DOCUMENTS WITH AUTHORISED SIGN AND STAMP BY COURIER.

HARDIK R. DUDAKIYA

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