

DECLARATION:

- I hereby declare that all the statements made in this Application here in above are true and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incorrect or incomplete or ineligible due to non-fulfilment of eligibility criteria, my application is liable to be cancelled/rejected at any stage.
- I hereby consent that details entered herein the Application form the basis for becoming a referral entity to the Channel Partner and authorise an Employee of the Channel Partner to enter the required details on my/ our behalf as per the instructions given by me in the electronic form for the issue of Credit Card.

Date :.....

(Signature of Authorized Person)
With Stamp

Place:.....

Requirements:-

1. Certified True Copy of PAN of Entity
2. Certified True Copy of GST of Entity
3. Certified True Copy of Registration Certificate of Entity
4. Certified True Copy of Address Proof of Entity
5. Self Attested KYC Documents of Individual/ Partners/ Directors/ Authorized Person
6. Cancelled cheque leaf or latest Bank statement showing Name and address of account holder, account number, Type of account, IFSC code etc.

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- If the applicant is already engaged as SR/CR/CCSA, code number allotted:

Verification and recommendation by Area Manager

Name of Area Manager :.....

Area Office :

(Signature of Area Manager)