

TO: SNAP ON TOOLS PRIVATE LIMITED**APPLICATION FOR RESELLERSHIP**

Date :
Division & area for which applied for Reseller ship:

SECTION 1: ABOUT YOUR ORGANISATION

1. Name :
Type of organization : Proprietorship / Partnership / Company
Address :
Website : E-mail :
Phone no. : Fax no. :
PAN No. :
Details of branch offices (if any):

2. Details of the Proprietor / Partner / Directors (use additional sheets if required) :
Name : Age :
Address (Residence):
Phone no : Mobile no. :
Experience : Attach brief resume

3. Banker's name : Account no.:
Address:
Current credit OD limits :
Available exposure: Current business : Lakhs
Proposed business : Lakhs

4. Sales Tax Registration No. : Local : Date:
CST : Date:
Other Licenses (pl give details) Date:

SECTION II: ABOUT YOUR CURRENT BUSINESS:**(attach separate sheet if you have more than one business).**

1. Nature & Description of business:
Date of incorporation :

2. Major Products / Brands handled :					
Product/Brand	Territory	Current Year Sales		Previous Year Sales	
		Nos.	Value(in lakhs)	Nos.	Value(in lakhs)

3. Manpower :			
Sales		Service	
Category	No.of people	Category	No.of people

SECTION III: Business References from Trade

Sr. No	Reference Name	Location	Address & Tel No.

SECTION IV: Auditors details

Sr. No	Reference Name	Location	Address & Tel No.

Note:

- Self certified copies of following Licenses / Certificates shall be attached with the application:
 - Sales Tax Registration
 - Memorandum of Association in case of Pvt. Ltd. / Public Ltd. Co OR partnership deed in case of partnership firm
 - Certificate of Registration under Shops & Establishment Act, if applicable
 - PAN Card
 - Copy of latest audited Balance Sheet and P&L Account
- The details of key Operating Manager who will manage the Snap-on business shall also be attached.
- Banker's certificate as to the good standing of the Reseller OR the bank statement of immediately 4 months prior to the date of filing of this application shall be attached.

Signature with stamp:

Name :

Designation :