

EERA GPS HOUSE DISTRIBUTORSHIP APPLICATION FORM

Date:

Full Name:	
Area of Operation:	
Date of Birth:	
Communication Address:	
City:	
State/Province:	
Post Code:	
Permanent Address:	
GSTIN / PAN:	
Mobile Number:	
Email:	
Personal Identification Marks:	
Purchase of Products along Start-up Kit:	Order Value: Order Description:
Registration Type: <i>(tick any one)</i>	Individual Partnership Company
Registration Name:	
Acknowledgement: I / We _____ hereby confirm and declare that the above stated information is true and best of my knowledge.	
Place:	Signature:

Attached Documents:

- 1) Aadhar Card
- 2) Pancard
- 3) Vehicle License
- 4) Electricity Light bill
- 5) Passport Size Photo