

Business Relations-Ship Form:

OM LOGISTICS LTD

130, Transport Centre, Ring Road, Punjabi Bagh, New Delhi - 110035

Application

A. Personal Particulars :

Name of the applicant : Mr. /Mrs./Ms. _____

Father's/Husband's Name : Mr. _____

Date Of Birth : ___/___/19___ Age : _____ Years _____

Residence Address : _____

Pin Code : _____ Ph. _____

Office Address : _____

Pin Code : _____ Ph. _____

E-Mail : _____

B. Business Particulars

Bank A/c No.& Bank Name : _____

Details of vehicle owned :

| Type Of Vehicle | Year Of Mnf. | Regd. No. |
|-----------------|--------------|-----------|
| | | |
| | | |

Details of experience in Cargo Industry (if any) : _____

Approx Cargo Business in Part Load:- Rs. _____

Approx Cargo Business in Full truck load Rs. _____

C. Reference Details

Name & Address of 2 persons known to you (but not your relatives)

01 : Mr./ Mrs./ Ms. _____ S/o D/o : Mr./Mrs. _____

Resident of : _____

_____ Pin Code : _____ Ph. : _____

02 : Mr./ Mrs./ Ms. _____ S/o D/o : Mr./ Mrs. _____

Resident of : _____

_____ Pin Code : _____ Ph. : _____

D. Security Deposit Details

D/draft No. : _____ Dated : _____ Payable At : New Delhi

Bank Name : _____ Amount (in fig.) : Rs. _____

Amount (in words) : _____

Certified that the information furnished above is correct to the best of my knowledge and belief and should it be found false on scrutiny, my PDA. Appointment (if made) is liable to be terminated without notice.

Date : _____

(Signature of the applicant)

Place : _____

Approval of R/Cmd sir

Business Relations-Ship Form:

| FAMILY BACKGROUND | | | | |
|-------------------|-------------------------|------------|-----------|-----|
| | Education Qualification | Occupation | Dependent | Age |
| Father | | | | |
| Mother | | | | |
| Spouse | | | | |
| Children | | | | |
| Brothers | | | | |
| Sisters | | | | |
| Family Business : | | | | |

| AREA DETAILS: |
|-------------------|
| Industrial Area : |
| Business Type : |
| Major industries: |
| Weekly off: |
| No Entry Area: |
| Major Products: |
| |

Are you working with Any other same company :

If Yes Kindly provide details : _____

How Came to know About Om logistics Franchise:

1: By Web Site. _____

2: By Friend (Provide Name) _____

3: Referred By Om logistics Emp. Employee (Provide Details) _____

4: By Any Business Associate: (Provide Name):

5: By Any other source: _____

Business Relations-Ship Form:

(FOR OFFICE USE ONLY)

7.5/F08/R0

A. Verification of applicant's personal & business date :

B. Office / Site Inspection Report :

C. Verified & Inspected by :

Name : _____ Designation _____

Branch : _____ Date of verification/Inspection : _____

D. BM/AM/RM/Approval : _____

E. Head - Franchise Dev. Approval : _____

STARTING DATE OF FRANCHISE :
