



Marketed by



Emirates
Petro Products
Company Pvt Ltd

APPLICATION FORM

STATE C&F AGENT/ DISTICT FRANCHISEE

State..... District.....(ONLY FOR FRANCHISE)

1. Name of Establishment :

2. Full Address :

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.....

Father's Name/Husband's Name :

Date of Birth :

Permanent Address :

.....

.....

Educational Qualification:.....

Phone No. : (O) (R).....

Fax No. :

E-mail :

Website :

2. Date of Establishment :

3. Constitution of the firm : Prop. / Partnership / Pvt. Ltd. / Ltd.

4. Name of Prop. / Partner / Director :

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6) D.L. No. : S.T. No. :

C.S.T. No. : PAN :

Cont.. 2

7. Area preferred for operation :.....

8. Name and Address of your Bankers :.....

.....

9. Name of Your Transporters (Bank Approved) :.....

Is anyone in your family involved in Petroleum Business ? Yes No

a) If 'Yes' please Provide Details

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Family Details :

i) Name of Son/s :

ii) Name of the Daughter/s

iii) Name of the Brother/s :.....

b) Person to be contacted in your absence :

Name :.....

Address :.....

.....Tel.No.:.....

Post :.....

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

Relation with the Applicant:.....

(Signature of the Other Recommended Person)

10. Suggestions, if any :

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Place :

Date :

Name :.....

Seal (Signature of C & F Agent)

Please fill Application form and send to eppcomarketing@gmail.com or Franchisee@emirateslubes.com

For Enquiry call us @ +91 988 66 11 119