



(an iso 9001:2015 certified company)

## **Business Franchise Application Form**

### Head Office : 302 3rd Floor Mithulok complex Khaitan lane West Boring Canal Rd., Patna, Bihar 800001

🛞 www.enskyinfo.com 🖾 enskyindia@gmail.com 🕓 Call.: 970862222 🛣 Office No.:0612 3582061

Application No:		Affix yourself attested Passport size Photograph
Applying For: District Partne	er Franchise	Here
Note:-This form is to be filled by th	e application or in consultation	with the main applicant and other ${\mathbb R}$
	ONAL INFORMATION	
	ll the form in CAPITAL LETTERS)	
Applicant		
First Name:	Last Name:	
Father's Name:	Age:	Lecn <sub>Pvt.Ltd</sub>
Date of Birth : Making		Y) Gender: Male Female
Residence Address:		
Town/city:	Block:	State:

Pin:	Phone (with STD	Code):
Mobile:	Email	
Current Business Ad	dress:	
8-		
Town/city:	Block:	State:
Pin:	Mobile:	Phone (with STD Code):
Your Business Goal/	Ambitions:	

### **Qualifications:**

Degree/Diploma	University	Subject/Steam	%Marks	Year of Passing

### Business Experience (If any):

Name of organization	Nature of Involvement	From (Year)	To (Year)	Turnover (In INR)	Profit(In INR)	Product/ Service	No. of
	(partner/			1			Emps
	Franchise)		1				
				Der la se			6
Work Experie	nce (If Any):			fo	10	ch.	

### Work Experience (If Any):

Name of	Designation		From	То	Nature	Product/	No. of
organization	Maki	salary	(year)	(year)	of work	Service	Emps
			-	-	3		

### Family Details:

Name	Age	Relationship	Qualification	Occupation

### DECLARATION

I/We declare that the details and information provide by me/us herein above are true to the best of my knowledge and belief.

Date:	Name:
Place:	Signature:
(1	OR OFFICE USE ONLY)
Application Status: Com	plete Incomplete
Remarks:	

INFRASTRUCTURE AND FINANCIAL INFORMATION

Note: This form is to be filled by the applicant only or in consultation with the main application and other key Persons.

# STRUCTURE OF THE BUSINESS ENTITY FOR FRANCHISE OPERATIONS

Prop	rie

prietorship Firm

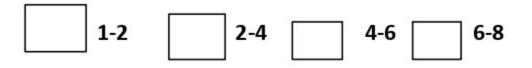
Partnership firm

Private Limited Company

Public Limited company

other (please Specify

#### **INVESTMENT CAPABILITY (IN INR LACS)**



### **PROMOTER'S DETAILS**

Name	Age	Proposed shareholding in franchise center	other Business Details	Whether worked somewhere Before

NAME OF NON PROMOTERS /KEY PERSONS BEING OFFERING PROFIT SHARING OR STOCK OPTIONS WHO

ARE GOING TO BE FULLY COMMITED TO THE OPERATIONS OF THE FRANCHISE CENTERE.

Name	Age	Activities to be taken up at
		the Franchise Center
		<b>DLECN</b> Pvt.Ltd

FINANCIAL STRENGTH (IN CASE OF EACH PROMOTER, PLEASE INDICATE THE AMOUNT TO BE INVEST)

Funds from Own Sources:

Name	Amount Available to Invest (In INR Lacs)	Time Required to Mobilize Funds(No. of Days)

Funds from other sources:-

Name	Amount Available to invest	Time Required to Mobilize	
	(In INR Lacs)	funds (No. of Days)	

### CHOICE OF CITY FOR FRANCHISE CENTER:\_

### **PROPOSED LOCATION WITHIN THE CITY:**

PLEASE ELABORATE ON THE REASONS FOR CHOICE OF LOCATION:



IN CASE THE ABOVE CITY / TOWNS IS NOT AWARDED TO YOU FOR FRANCHISE OPERATION,

WOULD YOU LIKE TO BE CONSIDERED FOR ANY OTHER CITY/TOWN?



If yes, please give you preferences:

S.No. in order of Preferences	Name of the city/Town/Block	Reason for choosing this city/Town/Block

CURRENT INFRASTRUCTURE, WHICH CAN BE MADE EXCLUSIVELY AVAILABLE FOR RUNNING CAREER VIEW FRANCHISE CENTER

Premises (Place to run franchise center) already available:

Yes No
If yes, please provide nature of premises:
Owned Premises Single ownership Multiple Ownership
Rented /Leased Joint
CENTERLITY OF LOCATION & THE RATIONALE
(Please give details regarding location, proximity to markets/residential Localities, and status of the neighborhood villages etc.)

### DETAILS OF ADDITIONAL OFFICE INFRASTURE

Telephone:\_\_\_\_\_\_computer:\_\_\_\_\_

Fax:\_\_\_\_\_Internet:\_\_\_\_\_

### DECLARATION

I/we declare that the details and information provided by me/us here in above are true to the best of my knowledge and belief.

Date:	name:

Place:\_\_\_\_\_\_signature:\_\_\_\_\_\_

To apply, please submit a draft for Rs.\_\_\_\_\_in favor of career

view(p)ltd,patna,payable at Patna along with the application form at our at our head office ,Patna.

Please Note:-

- Write on the reverse of the DD,"ENSKY INFOTECH PVT LTD "thereafter put your name, contact no.
- Retain a Photocopy of the DD submitted at our Head office for future reference.
- The application form cost is non-refundable and non-transferable.
- Before submitting the application form, please ensure that the form is completely filled and duly signed by applicant(s).

	FOR OFFICE	USE ONLY Digital Era	
Application status:	complete	Incomplete	

Remarks:		