

APPLICATION FORM FOR AGENT / AUTHORISED RETAILER FOR MILK AND MILK PRODUCTS

													Paste stamp size photo													
A. Na	me & perso	nal details																								
1 Nar	etter)																									
2 Fatl	her's Name	3.									. Spc	use N	ame													
4 Dat	e of Birth	D D M	M	M Y Y Y Y			5	Sex (I	ex (M/F)				6	Mobile No												
7 Pr	oof of Identity	Aadhar No												8		mail I										
B. Selling Counter Details																										
1 Loc	cation Name													2	Tow	n										
3 Cor	nplete Address										Whether you want to keep Produc with Milk . (Y/N)										ts & Ice Cream along					
												5 Ownership Type (Own/Ren						nted	ed)							
														6	f Lea	sed,	the l	ease .	Autho	rity						
	plicant Add		. D																_		-44 4	d d				
1. Address item				z. Perm	anent /	Address					\neg					Γ					s. Cor	ntact A	aaress			
a. House	e/Plot Number															إ										
b. Area/Road Name or Village																										
c. Post Office																										
d. Ward No. or Gram Panchayat																										
e. ULB or Block Name																										
f. Distric	t																									
g. PIN Code								_								[
I do, hereby ,undertake that the above mentioned information furnishied by me is true & correct to the best of my knowledge.																										
Plac Dat																				Si	gna	ture	of a	plica	ant	
Not	Note: Kindly submit the following documents (Xerox copy) along with this application form and (V) mark which is enclosed.																									
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