Application form for Master Franchisee

# Basic Details

1. **Applicant Full Name –**
2. **Gender –**
3. **Applicant Date of Birth –**
4. **Applicant Mail ID –**
5. **Pan card Number –**

1. **Correspondence Address -**
2. **Permanent Address –**
3. **Applied District for Master Franchisee –**
4. **Entity Type (Co – operative Society/ Company/ Individual/ LLP/NGO/Partnership/Proprietorship/SHG/Trust) –**
5. **Entity Name –**
6. **Entity Address –**
7. **GST Number –**
8. **List of Documents attached as per entity –**
9. **Entity account details –**
10. **Account details of Vakrangee to pay the refundable security deposit –**

|  |  |
| --- | --- |
| **Account Number** | 910020010980585 |
| **IFSC Code of Bank** | UTIB0000020 |
| **Bank Account Name** | VAKRANGEE LIMITED |
| **Name of the Bank** | Axis Bank |
| **Branch Name** | Andheri- West, Mumbai (MH) |
| **Type of Account** | Current Account |

**Please attached the picture/screenshot of the payment in this file and the mail to** jyoti.singh@vakrangee.in