



ACKNOWLEDGEMENT

Amount Rs.

Mode : Cheque Cash

Cheque / DD No :

Drawn on :

Collected by :

Signature :

Cleared On :

Verified By :

Form No. : Date :

Sent for Processing On :

By :

Signature



- A. RETAIL PARTNER
- B. MASTER PARTNER
- C. WHITELABLE PARTNER

ONE STOP SHOPPY

Head Off. : 8193/6, Arakashan Road, Pahar Ganj,
New Delhi-55 Ph. : 011-40006000 (100 Lines), 43538594

E-mail : info@onestopshoppy.com,
Website : www.onestopshoppy.com

OSS
APPLICATION
FORM

Agency Name :

Contact Person :

Master Partner Name :Product.....

BUSINESS
INFORMATION

Company Address :

City :State:.....

Busi. Tel. No. Code :No.....Alternation No.....

Moblie.....E-mail :

Nature of Business

Type of Orgnisation Prop. Partnership Pvt. Ltd.

Pan Card No.....VAT Tin No.....

Dom
Name

Option : 1.....2.....

Option : 3.....4.....

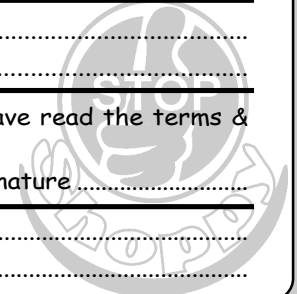
I herewith confirm that above informaton are correct and I have read the terms & conditions myself and I agree and abide with them.

Signature : Date : Company Signature.....

BANK
DETAIL

Banke NameAccount No.....

Branch :City.....














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Best Compliment

Happy Selling with OSS Family

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<i>HOTEL</i> 	<i>Bill Payment</i> 	<i>DTH Recharge</i> 
<i>BUS</i> 	<i>HOLIDAY</i> 	<i>General Insurance</i> 

Much More Coming Very Soon.....