Annexure 2

MAIN APPLICATION FORM

DEALERSHIP FOR PETROLEUM RETAIL OUTLET



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IMPORTANT: Please read the instructions before filling up the form

1. Please use BLOCK LETTERS to fill up the form. 2. Kindly tick the appropriate boxes wherever required and as applicable. 3. Application should be complete in all respects. 4. Please ensure all supporting documents are attached. 5. Please avoid cross marks on the form for error free processing. 6. Kindly affix recent passport size photograph.

Please fill in the following Application Form Refere													No:
Location Preference:	Location Preference:												
							D	istric	t:				
State:]						
1. Applicant Details													
Applicant is a /an Individual Proprietorship Concern Partnership Firm													
Limited													
liability Partnership (LLP)													
Others (Please Specify)	LI	1	1		_1	<u> </u>	1		I	1			
Please fill Section 1.1 and Section 5 proceed to Section 1.2 if an individ		applic	ant is	a Fir	m/Prc	prieto	orship	/LLP.	You	may	dire	ctly	
1.1) Details of Firm/Proprietorship/LLP: (Und	ler 🔽			<u> </u>			<u> </u>				1		
which Dealership should be awarded)				1							1		
Name of Firm/Proprietorship/LLP:													
Registered Office Address:													

Address for Correspondence:

	-			 -		 	 		 -	
										/
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Represented by:												
Mr./Mrs./Miss												
		First No	ame		Mida	lle Name			Last	Name		
Г												
L		Surnan	ne									
Date of Birth:						1						
D	D	М	м ү	Ŷ	Y Y	_						
Business/Office Addre	ess:											
Village /Town/City:												
District:												
State:												<u> </u>
State.												
Pin Code:				Teler	ohone:							
Fax:												
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		Mobile	:	I								
E-mail:												
Facebook ID:			Twitte	r Handle	:			Websi	te/Blog	:		
			_						, ,			
1.2)												
Name of Individual:												
Residence Address:				I		11	1		1		1	1
	· · · · ·									1 1		
Village /Town/City:												
District:												
State:												
Pin Code:					phone:							
Pin Code: Permanent Address: I	f differe	nt from Re	esidence									

Village /Town/City:																
District:																
State:																
Pin Code:					Te	eleph	one:									
No of years of Residence	/Busine	ss in tł	he D	istric	t appl	lied fo	or:									
Details of Educational Qualifi	cation															
Examination Passed			ι	Jnive	rsity/	Board				,	Year o	of Pas	sing			
Educational Qualification: Please Tick below																
Undergraduate Graduate Post Graduate Professional																
Profession: Business Service																
Self Employed Professional (Please Specify):																
Others (Please Specify):																
Marital Status: Married Unmarried																
No. of Children: 1				2			3]	Ν	Aore 1	than 3	3			
Age of Children						[]							
Are you a Member of C	lub/Pro	fessio	nal	Body	: Ye	es 🗌			No]					
If Yes, Please give detail	s:															
Name of Club/Profession	าal Bod	y:														_
Position:							_									
2. Work Experience of	Applica	int														
(Note: To be filled by individua	l or by p	erson v	l who	is rep	resen	ting tł	ne Firr	n/Pro	prieto	rship/	/LLP as	s in Se	ction	1.2)		
Work experience (starting f	rom Cui	rrent F	irm):												
A. From:	<u>ү</u>			То	: [1 N	Л	Y	Y]						
Firm:																_
Location:																
Designation:																_
Firm Turn Over: R	ls.				L	acs.										
No. of Persons Supervised:																

Job Profile: _____

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Firm:									
Location:		 						 	
Designation:		 						 	
Firm Turn Over:	Rs.		Lacs	S					
No. of Persons Su	pervised:		1						
Job Profile:									

(if you want to provide more information please add a separate sheet)

3. Current Businesses/Firm

Note: 1. Please ignore this section if you are/were employed. 2. In case the applicant is a Firm/ Proprietorship/LLP, please include details of major group/sister firms and affiliates.

3.1 Business/ Firm Details:

Note: In case the applicant has more than 2 businesses, please attach separate sheet detailing the same.

3.2 Qualified Personnel Employed in Key Positions in Businesses as mentioned in Section 3.1

4. Investing Entity

We understand that investment can be made either by the individual, his/her family (Spouse, Children, Parents and Grandparents only), or it could be made through a firm (which may either be Partnership/Pvt. Ltd. Company, Public Ltd. Company etc.)

Please specify how the investment is proposed to be made:

By Individual

Through Firm

5. Financial Details

In case investment is by Individual/Family/Proprietor, please fill Box A and if it by Firm/Company fill Box B

5.1) To be filled by Applicant who is an Individual/Proprietorship Concern

5.1.1) Sources of Funds for Investment

Rs. Lacs

From own sources (Applicant, Spouse, Children,	
Parents, Grand Parents	
From Firms owned / Promoted by Applicant	
and his family members as above	
From Friends and Relatives	
From Banks	
Any Other Sources (Please Specify	
Total Proposed Investment	

5.1.2) Net Worth Statement (Of Applicant and his/her Spouse, Children, Parents and Grandparents)

	I
Assets (Current Market Value)	As on
Land & Buildings	
Other Fixed Assets like vehicles	
Investments in PPF, NSC, LIC, Shares, Bonds, FD,	
Business Firm etc	
Gold & Jewellery	
Cash & Bank Balance	
Any Other Assets	
Total Assets	
Liabilities	
Loans Payable	
Other Liabilities	
Total Liabilities	
Net Worth (Total Assets – Total Liabilities)	

5.1.3) Income /Profit Statement

Rs. Lacs

Income From	Act	tual	Projected
	Prior to Last F.Y.	Last F.Y.	Current F.Y.
Salaries of (Applicant, Spouse, Children,			
Parents and Grandparents)			
House Property (Rental)			
Business (Profit / Loss)			
Capital Gains			
Interest on Investments			
Other Sources (Please Specify)			
Total			

Rs Lacs

5.2) To be filled by Applicant which is a firm/LLP

5.2.1) Sources of Funds for Investment

Rs. Lacs

From Owned Resources/Retained Earnings	
Contribution through Capital	
Borrowings through Banks	
Any Other Source (Please Specify)	
Total Proposed Investment	

5.2.2) Net Worth Statement

	Rs. Lacs
Assets (Current Market Value)	As on
Net Fixed Assets	
Investments	
Loans and Advances	
Inventories	
Debtors	
Cash & Bank Balance	
Any Other Assets	
Total Assets	
Secured Loans	
Unsecured Loans	
Creditors	
Provisions	
Any Other Liabilities	
Total Liabilities	
Net Worth (Total Assets – Total Liabilities)	

5.2.3) Profit & Loss Statement

Income	Actual		Projected
	Prior to Last F.Y.	Last F.Y.	Current F.Y.
Sales Value			
Other Income			
Variation in Stocks			
Total			
Expenditures			
Purchases			
Manufacturing & Other Expenses			
Profit before Depreciation, Interest and tax			
Interest & Finance Charges			
Cash Profit			
Depreciation			
Profit Before Tax			
Provision for Taxation			
Profit After Tax			

6. Reference

Note: 1. Reference that you give in this section may be contacted by AGCL for reference check. 2. No reference given in this section should be a relative of the applicant

6.1) Please give details of your main Bankers:

Name of Bank:	
Address:	
Officers Name:	Designation:
Officers Name:	
Mobile No:	
Address:	
Officers Name:	Designation:
Mobile No:	_
6.2) Please give names and contact detail	ls of any two respected individuals of your city/town/village:
Name:	Designation:
Address:	
Mobile No.:	
Name:	Designation:
Address:	
Mobile No.:	_
6.3) Please give names and contact detail	ls of any two of your major suppliers, preferably in your city:
Name:	Designation:
Address:	
Mobile No:	
Name:	Designation:
Address:	
Mobile No:	_

6.4) Please give names and contact details of any two of your major customers, preferably in your city:

Name:	Designation:		
Address:			
Mobile No:			
Name:	Designation:		
Address:			
Mobile No:			
6.5) Please give name and contact details of your audinames and contact details of any two of your major su		•	e give
Name:	Designation:		
Address:			
Mobile No:			
7. Association with AGCL			
7.1) Are you an existing business associate of AGCL (Contractor, Supplier, Ve	endor)? Yes	No
If Yes, Please give details:			
Type of Association: Contractor Supp	lier Ver	ndor	
Details of your contact person in AGCL:			
Name:	Designation:		
8. Litigation			
Please give details of any litigation against yourself or any /Partner	company/firm in which y	ou are a Director/	/ Promoter
Have you ever been named in a FIR?		Yes	No
Have you ever been charge sheeted?		Yes	No
Have you ever been arrested or imprisoned?		Yes	No
Have you ever been convicted?		Yes	No
Have you (or if the applicant is a company; any of its share	holders and/or	Yes	No
Directors or managers) ever been bankrupt, or have been	a director and		
/or shareholder of a company which has been liquidated			
(If answer to any of the above is yes, please fill in details in	separate sheet)		

9. Details of Other Promoters:

Please mention details of promoters, other than applicant who will have stake (holding) in the proposed dealership.

Name:
Relationship with the main applicant:
Current Occupation:
Name:
Relationship with the main applicant:
Current Occupation:
(in Case there are more than two promoters please mention details in a separate sheet) 10. Dealership Manager:
Who will be responsible for running the Dealership/Outlet on a day-to-day basis? Please give details.
Applicant Hired Professional Manager Applicant Relative
If Relative Please specify relationship:
Note: In case the Dealership Manager who will run the operations is different from the Applicant, his details should be attached as per Section 1.2 and Section 2 by photocopy of the blank sections and filling them or by typing the required information as per format.
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11.In case you wish to provide any further details in support of your suitability for appointment as a dealer for AGCL Petroleum Retail Outlet, please attach a separate sheet

12.Declaration

- i) I declare that the above information is true and correct
- ii) I authorise AGCL and its agents to read, review, check and verify any information provided by me in the application.
- I also authorise AGCL and its agents to visit my Office/Business/Residential premises etc and talk to my suppliers, customers, bankers, auditors, social references and any local people with reference with my application
- iv) I confirm that I have never been indicted/found guilty/sentenced by any court, statutory body or tribunal.
- v) I confirm that AGCL has the right to reject my application at any stage in the selection process, without assigning any reasons whatsoever.
- vi) I acknowledge that, this is only an application form. Submission of this application form is not taken as any indication that AGCL will enter into any agreement with me and that nothing contained in this form shall constitute a contract.
- vii) I understand that all replies by the applicant to inquiries made by AGCL in course of discussion between AGCL and applicant will be treated by AGCL as representations which shall be important factors in any decision by AGCL whether or not to grant a dealership to the applicant and if any information disclosed by the applicant to AGCL on this application form, or in the course of those discussions, is found to be incorrect or misleading, for any reason, AGCL will have the right to terminate any agreement that may be entered into by AGCL and the applicant without any liability of AGCL towards applicant.
- viii) I understand and affirm that I am authorised to represent the Company/Firm/ Proprietorship/LLP in Section 1.1 of this application form and to sign and execute documents, application, agreements etc. on its behalf.

Place:

Date:

Name: _____

Signature:

M/s: _____

List of Documents Required with Application

Note: 1. Please attach appropriate documents as per the nature of applicant mentioned in Section. 2. AGCL may ask additional documents at any time during the evaluation process of your application. 3. Please tick the documents submitted.

1) Individual /Proprietorship Concern

- a) IT Pan Number of Individual/Proprietor
- b) CA Certified latest Net Worth Statement on CA's Letterhead
- c) Previous 2 years Audited Balance Sheet and Profit & Loss Statement
- d) Copy of Latest IT Return (ITR) with Computation
- e) Bank Statements of Last 6 Months
- f) Form 16 in case candidate is an employee
- 2) Partnership Firm
- a) Name of the Partners with % Holding (Copy of Partnership Deed)
- b) IT Pan Number of Partners
- c) IT Pan of the Entity
- d) Bank Statements of Last 6 Months
- e) CA Certified latest Net Worth Statement on CA's Letterhead
- f) Previous 2 years Audited Balance Sheet and Profit & Loss Statement
- g) Copy of Latest IT Return (ITR) with Computation
- 3) Limited Liability Partnership (LLP):
- a) Certificate of Registration issued by Registrar of LLP
- b) Incorporation Deed/Agreement of LLP
- c) Updated List of Designated Partners.
- d) IT Pan Number of Partners
- e) IT Pan of the Entity
- f) CA Certified latest Net Worth Statement on CA's Letterhead
- g) Previous 2 years Audited Balance Sheet and Profit & Loss Statement
- h) Copy of Latest IT Return (ITR) with Computation

Total No of Documents Enclosed:

Total No of Extra Sheets (Supplements) Enclosed: