

APPLICATION-FORM TO BECOME -VERSURA SHIKSHA REFERRAL PARTNER (VSRP)

Space for
(Photograph)

To

The Regional Head

VERSURA SHIKSHA SERVICE PVT LIMITED

G-26, G7 Mall, JP Road, Seven Bungalows,

opposite Versova Metro Station,

Andheri West, Mumbai – 400 061

Dear Sir,

SUB : APPLICATION TO BECOME VERSURA SHIKSHA REFERRAL PARTNER (VSRP)

I / We hereby make this application to become the Versura Shiksha Referral Partner (VSRP). I / We furnish herewith the following particulars for the purpose as required by you

Name of the Person / Firm applying for VSRP	
Age [only individual appl.]	Age _____ D.O.B _____
Applicant's Status / Constitution	<input type="checkbox"/> Individual <input type="checkbox"/> Prop. Firm <input type="checkbox"/> Partnership Firm <input type="checkbox"/> Pvt. Ltd. Company

	[] Other (Pl. specify) _____			
Details Of Non Individual VSRP	Name	PAN No.	D.O.B	% Share
Communication Address				
Name of the Contact Person's				
Contact Number / s	[O] _____ / _____ [R] _____			
	[Mobile] _____			
	PAN No.: _____			
	GST No. : _____			

Qualification / s [In case of firm / company, mention the same of the Key Partners / Directors]	
--	--

Minimum No. of loan-cases /other product offerings you could refer per month	
Name & Address of References [Here, you have to give any two names & addresses of persons who know you well and can give reference about you]	<u>Reference-1</u>
	Name :
	Designation / Occupation :
	Business / Organization Name :
	Address :
	<u>Reference-1</u>
Name :	
Designation / Occupation :	

	Business / Organization Name :
	Address :

I / we request you to kindly empanel me / us as the “Versura Shiksha Referral Associate (VSRP). I / We have been explained by your office, the detailed terms and conditions of appointment and have completely understood the same. I / We am / are agreeable in-principle, to such terms and any other terms & conditions. I / We am / are also agreeable to be bound by any other terms & conditions that may be framed from time to time on this by your company.

I / We do not have any objection to your checking with any of our above references about me / us.

I / We hereby confirm & undertake that I / We shall always refer to you genuine loan-inquiries to you with all correct information & documents. I / We that my/our VSRP shall be terminated in case of any misrepresentation of any information, data or documents etc.

I / We understand that an agreement will be entered between me / us and Versura Shiksha describing in detail the terms and conditions of my / our appointment and I / We agree to abide by the same.

I / We confirm that the information and particulars furnished above is true and correct

Date : _____

Signature & Stamp : _____