

FORMS A | B | C | D

FRANCHISE APPLICATION FORMS

(All Forms to be duly filled & sent to Registered Office)

Rare Opportunity for Tomorrow's Entrepreneurs...

Primary Applicant's Name: _____

City / Town Applied For: _____

Application No.: _____ (For Office Use)

Application Status: _____ (For Office Use)



Aakash

Medical | IIT-JEE | Foundations

(Divisions of Aakash Educational Services Limited)

Rare Opportunity for Tomorrow's Entrepreneurs...



Aakash

Medical | IIT-JEE | Foundations

(Divisions of Aakash Educational Services Limited)

Registered Office: Aakash Tower, 8, Pusa Road, New Delhi-110005. Ph.: (011) 47623456 Extn.: 406 / 402 / 405. Fax: (011) 47623472

Website: www.aakash.ac.in | E-mail: franchise@aesl.in | TOLL-FREE No.: 1800-102-2727



PROSPECTIVE FRANCHISE APPLICATION

A Prospective Franchise Application (“Application”) must be completed by each prospective owner of an Aakash franchise. Please allow approximately 2 to 3 weeks time to review and process your Application.

Understand that under no circumstances does the submission of your Application to Aakash Educational Services Limited (AESL), subsequent review and processing imply in any manner Aakash Educational Services Ltd.'s intention to approve you as an Aakash franchise. The Applicant shall not be deemed to be accepted and approved by Aakash Educational Services Limited. until and unless the complete execution of Aakash Franchise Agreement takes place.

No employee or agent or partner of Aakash Educational Services Limited has the authority to waive or otherwise deviate from the foregoing procedures and should any deviation from the Application procedure occur, the waiver or deviation from the Application procedure shall not be binding upon Aakash Educational Services Limited.

Further, the AESL can reject application form of any prospective applicant without assigning any reason. No query in this regard will be entertained.

DECLARATION:

I _____,
[Name of individual applying to be an Owner]
(the “Applicant”) am interested in submitting this Application to Aakash Educational Services Limited for the purpose of the evaluation of my qualifications and credentials to own and/or operate a franchise of Aakash Educational Services Limited.



Form **A**

Application No.:

To,
The Managing Director,
Aakash Educational Services Limited
Aakash Tower,
8, Pusa Road,
New Delhi-110005

FRANCHISE APPLICATION FORM

Affix your recent passport size colour photograph here.

Applicant 1

Affix your recent passport size colour photograph here.

Applicant 2

Note: This form is to be filled by the main candidate(s) or in consultation with the main candidate(s) and other key person.

PERSONAL INFORMATION
(Please fill the form in CAPITAL LETTERS)

Applicant - 1 (Owner)

First Name: [Grid]

Last Name: [Grid]

Father's/Guardian's Name: [Grid]

Date of Birth: [D][D][M][M][Y][Y][Y][Y] Gender: Male Female
(Please Tick (✓) the relevant box)

Passport / Voter ID Number: [Grid]

Aadhar Number: [Grid]

Residence Address: [Grid]
(Permanent Address)

City: [Grid]

State: [Grid] Pin Code: [Grid]

Phone: [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] Phone: [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid]
(STD Code) (Number) (STD Code) (Number)

Current Business Address: [Grid]
(Please ignore if same as Residence Address)

City: [Grid]

State: [Grid] Pin Code: [Grid]

Phone: [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] Mobile: [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid]
(STD Code) (Number) (Number)

Applicant - 2 (Owner)

First Name: [Grid]

Last Name: [Grid]

Date of Birth: [D][D][M][M][Y][Y][Y][Y] Gender: Male Female
(Please Tick (✓) the relevant box)

Passport / Voter ID Number: [Grid]

Aadhar Number: [Grid]

Address: [Grid]

City: [Grid]

State: [Grid] Pin Code: [Grid]

Phone: [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] Phone: [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid] [Grid]
(STD Code) (Number) (STD Code) (Number)

OWNERSHIP PROFILE

Please provide information on your proposed ownership structure, including each individual and legal entity that will potentially own and/or control beneficial ownership interests and/or hold major management positions in the proposed franchise business. (Please take photocopy of FA-2 & FA-3 if applicants are two and fill these pages separately)

In addition, please identify a majority owner who will personally be at the centre to actively control the day-to-day operations and administration of the franchise centre on a full-time basis.

S.No.	Name	Position / Title	Percentage of Total Ownership	Active / Inactive
1.			%	
2.			%	

100% (Indicate NA where Not Applicable)

NOTE: Any additional or other individual with direct or indirect beneficial ownership interest in the franchise business must be explained on a separate attachment and such person must submit a separate FA2- FA3 duly filled pages and be approved as an owner by Aakash Educational Services Limited., if applicable.

QUALIFICATIONS (Order: Please mention latest qualification first)

Degree / Diploma / Certificate	University/Institution	Subjects / Stream	% Marks / Rank / CGPA	Year of Passing

(Indicate NA where Not Applicable)

BUSINESS EXPERIENCE (If Any)

Name of Organization	Nature of Involvement (Partner / Director etc.)	From (Year)	To (Year)	Turnover (In INR)	Profit (In INR)	Product / Service	No. of Employees

(Indicate NA where Not Applicable)

WORK EXPERIENCE (If Any)

Name of Organization	Designation	Salary Drawn (Annual CTC)	From (Year)	To (Year)	Nature of Work	Main Product / Service	No. of Employees

(Indicate NA where Not Applicable)

FAMILY DETAILS (All fields are mandatory)

Name	Age	Relationship	Qualification	Occupation/Business
		Grand Father		
		Father		
		Mother		
		Brother(s)		
		Sister(s)		
		Spouse		
		Children		
		Uncle (Paternal)		

(Indicate NA where Not Applicable)

DECLARATION

I / We declare that the details and information provided by me / us herein above are true to the best of my knowledge and belief.

Date: _____ Name: _____ Name: _____
(Applicant - 1) (Applicant - 2)

Place: _____ Signature: _____ Signature: _____
(Applicant - 1) (Applicant - 2)

(FOR OFFICE USE ONLY)

Application Status: Complete Incomplete Personal Profile Strength: 1 2 3 4 5 6 7 8 9 10

Remarks: _____

Application No.:



Form B

FINANCIAL INFORMATION & OBJECTIVE ASSESSMENT

Note: This form is to be filled by the main candidate(s) or in consultation with the main candidate(s) and other key persons.

STRUCTURE OF THE BUSINESS ENTITY FOR FRANCHISE OPERATIONS

- Proprietorship Firm
 Partnership Firm
 Private Limited Company
 Limited Company
 Other (Specify) _____

INVESTMENT CAPABILITY

- 40 - 60 Lacs
 60 - 80 Lacs
 80 Lacs - 1 Cr.
 1 - 1.5 Cr.
 1.5 - 2 Cr.

PROMOTERS' DETAILS

Name	Age	Proposed Share holding in Franchise Centre	Other Business Details	Prior Experience Details	Nature of Involvement with AESL Operations

(Indicate NA where Not Applicable)

NAME OF NON-PROMOTERS / KEY PERSONS BEING OFFERED PROFIT SHARING OR STOCK OPTIONS WHO ARE GOING TO BE FULLY COMMITTED TO THE OPERATIONS OF THE FRANCHISE CENTRE

Name	Age	Activities to be taken up at the centre

(Indicate NA where Not Applicable)

FB-1



PERSONAL FINANCIAL STATEMENT FROM EXISTING BUSINESS/JOB OF THE KEY APPLICANT ONLY

Assets		Liabilities	
Cash Equivalents (e.g. Money Market Accounts & CDs)	_____	Account Payable Payable to:	_____
Marketable Securities - Publicly Traded Stocks - Mutual Funds - Publicly Traded Bonds Total Securities Value:	_____ _____ _____ _____	Loans - Banks - Family - Others Total Loan Debt:	_____ _____ _____ _____
Whole Life Insurance (Cash Surrender Value) Total Insurance Value:	_____ _____	Tax Payable Details:	_____
401K, IRAs, and other Vested Retirement Accounts (list) _____ _____ Total Retirement Account Value:	_____ _____ _____	Real Estate Indebtedness - Primary Residence - Office Space - Rental Properties/Commercial Investments - Vacation Home / Farm Houses Total Real Estate Debt:	_____ _____ _____ _____ _____
Real Estate - Personal Residence - Office Space - Rental Properties/Commercial Investments - Vacation Home / Farm Houses Total Real Estate Value:	_____ _____ _____ _____ _____	Credit Cards / Revolving Credit - _____ - _____ Total Credit Card or other Liability:	_____ _____ _____
Total Assets:	_____	Total Liabilities:	_____
TOTAL NET WORTH: (Total Assets less Total Liability)		_____	

(Indicate NA where Not Applicable)

Note: Please use a separate sheet to mention the details of people and business of which you are guarantor. Also, mention the details of any other contingent liabilities and list of assets which are in joint tenancy or under encumbrance or part of a trust/society.

For Office Use Only	
Cash	_____
Marketable Securities	_____
50% Whole Life Insurance	_____
50% 401(k)s, IRAs	_____
70% Real Estate Equity	_____
Total Liquidity:	_____

FB-2



AVAILABILITY OF FUNDS FOR AAKASH FRANCHISE (Taking all promoters together)

Funds From Own Sources:

Name of Investor / Fund	Amount available to Invest (In INR Lakhs)	Time required to Mobilise Funds (No. of Days)

(Indicate NA where Not Applicable)

Funds From Other Sources: (Please mention available credit facilities etc. also)

Name of Investor / Fund	Amount available to Invest (In INR Lakhs)	Time required to Mobilise Funds (No. of Days)

(Indicate NA where Not Applicable)

FRANCHISE CENTRE PREFERENCE ASSESSMENT:

Please fill the target location details, where you would prefer to have an Aakash Franchise. This information will be used to match you to potential franchise opportunities.

CHOICE OF CITY FOR FRANCHISE CENTRE: _____

PROPOSED LOCATION/AREA WITHIN THE CITY: _____

PLEASE ELABORATE ON THE REASONS FOR CHOICE OF LOCATION:

IN CASE THE ABOVE CITY / TOWN IS NOT AWARDED TO YOU FOR FRANCHISE OPERATION, WOULD YOU LIKE TO BE CONSIDERED FOR ANY OTHER CITY / TOWN?

Yes No

If Yes, please give you preferences:

S. No. (In order of preference)	Name of the City / Town	Reasons for choosing this City / Town

(Indicate NA where Not Applicable)



BECOMING A FRANCHISEE OF AAKASH

1. WHY DO YOU WANT TO BECOME A FRANCHISEE OF AAKASH?

2. DEFINE YOUR ROLE IN PROPOSED AAKASH FRANCHISE

3. PROPOSED BUSINESS SUCCESSION PLAN YES NO

NAME: _____
RELATIONSHIP: _____
COMMENTS: _____

4. WHY DO YOU FEEL YOU ARE QUALIFIED TO OWN AN AAKASH FRANCHISE?

CURRENT INFRASTRUCTURE, WHICH CAN BE MADE EXCLUSIVELY AVAILABLE FOR RUNNING AAKASH INSTITUTE, AAKASH IIT-JEE & AAKASH FOUNDATIONS FRANCHISE CENTRE

Premises (Place to run franchise centre) already available:

Yes No

If Yes, please provide nature of premises:

Owned Premise Single Ownership Multiple Ownership Rented / Leased
 Joint

In case of Owned Premises, please furnish details for the same:

Carpet Area / Build up Area (In Sq. Ft.): (Please tick mark as relevant)

5000 - 6500 6500 - 7500 More than 7500

Number of Floors / Storey: (Please tick mark as relevant)

Only Basement Basement + G. F. G. F. + F. F. All of the above



Classroom Details (If Any)

Number of Owned classrooms ready to use: _____

Covered area of each classroom (In Sq. Ft.): _____

CENTRALITY OF LOCATION & THE RATIONALE

(Please give details regarding location, proximity to educational institutions / Residential Localities, and status of the neighborhood etc.)

DETAILS OF ADDITIONAL OFFICE INFRASTRUCTURE

Telephone: _____ Computers: _____

Fax: _____ Internet: _____

IN CASE YOU ARE ALREADY ENGAGED IN THE TRAINING OF STUDENTS FOR MEDICAL OR ENGINEERING OR MANAGEMENT ENTRANCE EXAMINATIONS, PLEASE FURNISH FOLLOWING DETAILS:

- 1. Name of the training/coaching institute: _____
- 2. Total no. of students enrolled in the last financial year: _____
- 3. No. of students successful in entrance exams through your centre: _____ (Medical) _____ (Engineering) _____ (Management)
_____ (Other: _____)
- 4. Total no. of students enrolled currently: _____
- 5. Total no. of faculty members: _____
- 6. Total no. of other staff members: _____
- 7. Total number of classrooms: _____
- 8. Total office area being used (In Sq. Ft.) _____

DECLARATION

I / We declare that the details and information provided by me / us herein above are true to the best of my knowledge and belief.

Date: _____ Name: _____ (Applicant - 1) Name: _____ (Applicant - 2)

Place: _____ Signature: _____ (Applicant - 1) Signature: _____ (Applicant - 2)

(FOR OFFICE USE ONLY)

Application Status: Complete Incomplete Financial Profile Strength: 1 2 3 4 5 6 7 8 9 10

Remarks:



FINANCIAL AND BACKGROUND REVIEW AUTHORIZATION

To Whom It May Concern

The undersigned authorize Aakash Educational Services Limited to verify facts, background as well as financial analysis of the applicant/s based on the information provided in this Application Form. The background analysis includes, among other things, a credit check and criminal background investigation.

The undersigned authorize(s) Aakash Educational Services Limited to perform such background and financial analysis and, in performing such background and financial analysis, to without limitation (i) verify statements made to Aakash Educational Services Limited and (ii) obtain, review, and analyze such information concerning the financial condition, credit standing, business and professional character, business running experience and personal characteristics of the undersigned as Aakash Educational Services Limited deem necessary.

The undersigned authorize(s) Aakash Educational Services Limited and the affiliated entities within or outside the organization to share the information obtained as a part of the background and financial analysis with each other for the purposes of analyzing and processing this Application. If this Application is being provided in connection with the purchase of an already running franchise of Aakash, then the undersigned authorize(s) Aakash Educational Services Limited to disclose to the seller of the franchise or the seller of the equity interest in the franchise, as the case may be, all or any part of the information on the undersigned's credit, business and professional character, business running experience and personal characteristics discovered as a part of the investigation.

Date: _____

Place: _____

Name: _____ (Applicant - 1)

Name*: _____ (Applicant - 1's Spouse)

Signature: _____ (Applicant - 1)

Signature: _____ (Applicant - 1's Spouse)

Name: _____ (Applicant - 2)

Name*: _____ (Applicant - 2's Spouse)

Signature: _____ (Applicant - 2)

Signature: _____ (Applicant - 2's Spouse)

*Applicant's spouse, if applicable, must also review and sign this authorization form. If not applicable, leave blank.

ENGINEERING COLLEGES: (Attach a sheet)

Whether your city has any Engineering College/Institute:

Yes No

S. No.	Name of Engineering College	No. of Seats Available (Category-wise)	Entrance Exam for Admission (National Level / State Level)	No. of Students writing Ent. Exam.	Ownership (Govt. / Private)	Ranking (National / State)

(Indicate NA where Not Applicable)

Estimated total no. of students appearing in Engineering entrance exams from the City/Town: _____

LIST THE EXISTING TRAINING INSTITUTES FOR ENGINEERING ENTRANCE EXAMS. IN YOUR CITY/TOWN:

S. No.	Name of Coaching Institute	Location & Proximity from your Centre	Entrance Exams. for which Coaching is Imparted	Total Student Strength	Average Fee Charged	Ranking/ Popularity (National / State)

(Indicate NA where Not Applicable)

PLEASE COMMENT WHETHER ANY OF THE ABOVE MENTIONED INSTITUTES FUNCTION LIKE A GOOD CORPORATE WITH MODERN MANAGEMENT PRACTICES OR NOT

S. No.	Name of Coaching Institute	Comments / Remarks

(Indicate NA where Not Applicable)

TRANSPORT DETAILS

Popular modes of transportation used by the students:

Own Vehicle Public Transport Pooled Vehicle Others (Please specify: _____)

NET POTENTIAL IN THE CITY PROPOSED TO BE OPTED FOR FRANCHISE

- In case of Medical, it is _____ students per year
- With an average fee of ₹ _____ for Medical Entrance Exam preparation
- Average market size of the city is estimated at ₹ _____ (No. of students/year X Average Fee)
- In case of Engineering, it is _____ students per year
- With an average fee of ₹ _____ for Engineering Entrance Exam preparation
- Average market size of the city is estimated at ₹ _____ (No. of students/year X Average Fee)

NOTE: Average % growth in number of students appearing in a year is around 15%. Each year, fee can also be increased depending upon the Inflation Index, Value Additions in services and overall response to Aakash Franchise Centre

FRANCHISEE GROWTH POTENTIAL

As an Aakash Institute / Aakash IIT-JEE franchisee, within three years, what % of the present market potential do you aim to capture:

A. Total number of Students per year: _____

B. Annual Turnover (In INR): _____

DECLARATION

I / We declare that the details and information provided by me / us herein above are true to the best of my knowledge and belief.

Date: _____ Name: _____ Name: _____
(Applicant - 1) (Applicant - 2)

Place: _____ Signature: _____ Signature: _____
(Applicant - 1) (Applicant - 2)

(FOR OFFICE USE ONLY)

Application Status: Complete Incomplete Demographic Profile Strength: 1 2 3 4 5 6 7 8 9 10

Remarks:

Application No.:



PROFESSIONAL PROFILE

Note: This form is to be filled by the main candidate(s) or in consultation with the main candidate(s) and other key persons.

Name: _____

Designation: _____

BUSINESS DETAILS (Details about current business/professional setup)

Name of the Organization: _____

Form of Organization:

Proprietary Partnership Private Limited Limited Others (Please specify: _____)

Nature of Organization:

Joint Sector Cooperative Private Sector Others (Please specify: _____)

Major Products / Services: _____

Outstation Branches/Centres

Yes No

(If Yes, please attach a list of addresses of the branches)

Total Assets (In INR): _____

Total Sales Turnover (In INR): _____

Number of Managers: _____

Total Number of Employees: _____

WORK EXPERIENCE

Please give a brief idea of the assignments and responsibilities handled, including change of position within one company:

Organization	Designation	Number of years of Experience	Job Responsibility

(Indicate NA where Not Applicable)



Your Business Goals / Ambitions: (Use extra sheets and attach it with this page, if required)

Your Achievements: (Use extra sheets and attach it with this page, if required)

DECLARATION

I / We declare that the details and information provided by me / us herein above are true to the best of my knowledge and belief.

Date: _____ Name: _____ Name: _____
(Applicant - 1) (Applicant - 2)

Place: _____ Signature: _____ Signature: _____
(Applicant - 1) (Applicant - 2)

(FOR OFFICE USE ONLY)

Application Status: Complete Incomplete Professional Profile Strength: 1 2 3 4 5 6 7 8 9 10

Remarks: _____

TERMS & CONDITIONS

Applicant hereby applies to Aakash Educational Services Limited (AESL) for approval to run and operate a franchise of Aakash Institute and/or Aakash IIT-JEE, which are divisions of Aakash Educational Services Limited, subject to the terms and conditions stated in this Application.

- A. If approved as a franchise of AESL, adequate equity capital must be available to finance the proposed franchise.
- B. Please be advised that AESL must approve a prospective franchise's legal entity name and/or trade name(s). The legal entity name may not contain any AESL trademarks. Conversely, the trade name must contain the full service mark of "Aakash Institute | Aakash IIT-JEE". If you have formed a legal entity that does not meet the above naming criteria, you will be required to amend any noncompliant names.
- C. The submission of this Application obligates neither the Applicant nor AESL to become a party to a Franchise Contract or Agreement. Costs associated with acquiring real estate and any other investments and expenditures made by Applicant in contemplation of AESL entering into a Franchise Contract or for other purposes related to this Application are at Applicant's sole risk and do not in any way obligate AESL, or any of its affiliates or representatives in any manner whatsoever.
- D. The execution of a Franchise Contract by AESL is the only manner by which AESL may accept and approve this Application.
- E. Applicant has been informed and understands that in connection with this Application, AESL may seek and obtain from various persons and entities, information on Applicant's credit, business and professional character, business running experience, and personal characteristics. Applicant consents to the foregoing and agrees to cooperate fully with AESL and shall provide, or authorize, the provision of all such information to AESL. Applicant authorizes AESL to share the information with each other for the purpose of analyzing and processing this Application.
- F. As part of our analysis to determine if you are qualified to be an Aakash Franchisee, please answer the following questions. At any time, has (i) Applicant personally, and/or (ii) during Applicant's tenure, has a business organization that Applicant controlled, owned, or managed:
1. been convicted (including pleas of no contest) of a crime (felony or misdemeanor), including, but not limited to, crimes involving theft, fraud, embezzlement, false pretenses, drugs, receiving (or concealing) stolen property, forgery, counterfeiting, odometer tampering or extortion? (Do not include arrests not resulting in conviction, youthful offenses, or convictions for minor traffic violations.)

Yes _____ (Initials) No _____ (Initials)
 2. been found civilly liable for or entered into a consent decree with respect to any consumer fraud, unfair trade practice or similar act or practice, including, but not limited to, misleading advertising and bait-and-switch sales tactics?

Yes _____ (Initials) No _____ (Initials)

If the answer is "yes" to any of the above, describe on a separate sheet of paper, to accompany this Application, the circumstances of the conviction, plea, civil order, or consent decree associated with each occurrence (including the date, nature, place and court). These answers will be considered in determining whether to award a Aakash Franchise to the Applicant. Also, please provide copies of the relevant final documents (judgment or consent decree, for example) issued with respect to each occurrence.
- G. Applicant hereby gives his/her consent to and acknowledges that in assessing Applicant's qualifications to be approved as an authorized AESL may rely upon surveys and ratings (conducted by use of questionnaires or otherwise) of Applicant's sales and service customers in any business in which Applicant has been involved. By signing this Application, Applicant also directs and authorizes the release by any third party to AESL, the information and results of surveys described in this section.

Applicant acknowledges that any misrepresentation or falsification of records, reports, surveys etc., relating to such customer satisfaction indices (past, present or future) will be reason alone to terminate this Application and any resulting Franchise Contract.

- H. Applicant acknowledges that he/she submitted this Application, executed any resulting Franchise Contract and made any related commitments solely in reliance on Applicant's own investigation of and judgment with respect to (1) the operation of a coaching centre in the Applicant's proposed market area and (2) the overall coaching industry, and not in reliance on any statements made or documents presented to Applicant by AESL, except for other statements and documents specified by the Applicant in writing to AESL prior to the Applicant's execution and submission of a Aakash Franchise Contract. Applicant understands that AESL will rely upon the foregoing acknowledgment.
- I. Applicant is at least 18 years of age and either is a (1) Indian citizen or (2) has the right to remain lawfully in India indefinitely and maintains a current primary residence in India.
- _____ (Initials)
 Yes, I am an Indian citizen. (Check box and initial if applicable.)
- _____ (Initials)
 No, I am not an Indian citizen; however, I have the right to remain lawfully in India indefinitely, and I maintain a current primary residence in India. Please provide documentation of your permanent residency, e.g., copy of your permanent residency card. (Check box and initial if applicable.)
- J. After the completed Application and accompanying Data Sheets and Schedules have been reviewed by AESL, Applicant may be required to provide additional information, including financial statements, verification of personal assets, and tax returns, deemed necessary by AESL, all of which information Applicant acknowledges shall become part of this Application.
- K. Any misrepresentation made in this Application shall give AESL the right to terminate any resulting or subsequent Franchise Contract(s).
- L. Applicant acknowledges and agrees that he/she is under a continuing obligation to provide AESL with prompt written notice of any and all changes in the information provided herein, so that his/her Application remains current and up to date in all respects.
- M. All applicants will agree to sign a confidentiality agreement with AESL if requested in the future.

Applicant acknowledges and accepts the terms and conditions of this Application and represents that all the information provided to AESL by Applicant or on Applicant's behalf, whether in this Application, in the accompanying Data Sheets, Forms and Schedules or otherwise, is and shall be true, correct and complete to the best of Applicant's knowledge.

Filling & Submitting the filled application form for franchise does not make him eligible for any kind of claim for franchise. Any application form for franchise can be rejected without assigning any reason. The decision of the Managing Director entitle the right to get franchise to any applicant.

Date: _____ Name: _____ Name: _____
(Applicant - 1) (Applicant - 2)

Place: _____ Signature: _____ Signature: _____
(Applicant - 1) (Applicant - 2)