



## Franchisee Application Form

Full Name:

Address:

City/Village:  State:

Country:  Contact No.

Email:

Date Of Birth:  Gender: M  F

### PERSONAL INFORMATION

1. Current Occupation: (Please Tick)  
a) Stockiest  b) Farmer  c) Business  d) Others \_\_\_\_\_

2. Where would you like to operate Refit Animal Care Store?  
City/Village: \_\_\_\_\_ Country: \_\_\_\_\_

3. How did you hear about Refit Animal Care? \_\_\_\_\_

4. I am interested in (Please Select One):  
1 Store \_\_\_\_\_  
2-5 Stores \_\_\_\_\_

5. GST No. (If any) \_\_\_\_\_

#### Terms & Conditions:

- Transportation charges will be paid by customer.
- Any breakage during transport will be the responsibility of purchasing party.
- Please send Original copy of cancelled cheque and two passport size photographs along with this form.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Signature