

# dealership registration

I/we request you to share SPN dealer plan.

## Contact

Name : \_\_\_\_\_

Email : \_\_\_\_\_

Telephone/Mobile : \_\_\_\_\_

## Business

Date of inception :   /

Business Category :  Proprietorship  Partnership  Private Limited  Public Limited

GST Number : \_\_\_\_\_

Branches (If any) : \_\_\_\_\_

Business Type/Nature of business : \_\_\_\_\_

We are dealer of following products/services : \_\_\_\_\_

\_\_\_\_\_

## Dealer copy

I/we would like to use dealer copy for internal use :  Yes  No

(SalesTracker/ServiceDesk/TimeTracker)

## Terms & condition

I/we accept all the details that I/we have mentioned in the form are complete and true to my knowledge

Name : \_\_\_\_\_

Designation : \_\_\_\_\_

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

Stamp & sign

*Kindly print this form on your company letterhead*

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