APPLICATION FOR MEMBERSHIP

| | Place |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|
| | Date |
| To, THE HONY. GENERAL SECRETARY FEDERATION OF ALL INDIA AUTOMO ASSOCIATIONS, 3620/21, NETAJI SUBHASH MARG, DARYAGANJ, NEW DELHI – 110002. | OBILE SPARE PARTS DEALERS' |
| Dear Sir, | |
| We desire to be enrolled as a General ALL INDIA AUTOMOBILE SPARE PARTS enclose herewith a draft/cheque for Rs only) being the amount and annual fee | DEALERS' ASSOCIATIONS and (Rupees |
| Memorandum & Articles of Association of Association are furnished herewith. | the Federation. Particulars of the |
| | Signature President / Secretary (Office Seal) |
| | Address |
| | |
| | |

PARTICULARS OF THE APPLICANT FOR MEMBERSHIP

| 1. | Name of the Association (in full) | | |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------------------|
| 2. | Registered Address Phone | Telegram | |
| 3. | The area over which it operates | | |
| 4. | A latest copy of your Memorandum & Articles of Association be attached | | |
| 5. | Give the number and date of Registration under which your organisation is Registered. Also attach a copy of Registration Certificate. | | |
| 6. | Date of Commencement of business and / or registration. | | |
| 7. | Bankers | | |
| 8. | Name of any other Commercial or Industrial Associations, Chambers of Commerce, Federation of which the applicant is a member. | | |
| 9. | The name of the person / who will represent it in the Federation and the position he / they occupies / occupy in the Association. | | |
| 10. | Please attach a list of Office – Bearers & Members of the Executive Committee of the current year showing their Name, address and business occupation. (Please use a separate sheet.) | | |
| 11. | The total number of members on the roll on this date of application together with a list of your members & their addresses & Sales Tax No. and date (Local & Upcountry) Telephone No. and Telegraphic Address. | | |
| 12. | Please attach a copy of your latest Audited Balance Sheet and Income & Expenditure Account and Annual Report. | | |
| Dat | ed20 | Authorised Signature | President / Hony. Secretary (Office Seal) |