

Agent Information

Firms Name :						
Address						
Firm Regd No				PAN No		
E Mail ID				Phone No :		
Authorised Person:				Fax No :		
Contract Person				Cell No		
Bank Details	A/c Holder Name :					
	A/C Number :					
	Bank Name:					
Accessories of Agent						
Computer	Yes	NO	Number:	Fax Machine	Yes	NO
Internet Side Linked						
Area Sq Feet Of Customer Desk				Working Time :		
Seating Capacity Of Customer				:AM	:PM	
Nature Of Existing Business						
Remittance Business With Other Company						
Experience of Remittance Business						
Distance from Main Road/Market						
Expected Sending No of Transaction Per Day				Cash Holding Capacity:		
Maximum Paying Capacity Per Transaction						
Maximum Paying Capacity Per day Transaction						
Coverage Area	East : West : North: South:					
Others (If Any)				 Signature	