



Speed
Reliability
Value Performance

COMPUAGE INFOCOM LTD

Address : D Wing 601/602, Graham Firth Steel Compound,
Ram Mandir Road, Behind Raheja Titanium,
Western Express Highway, Jay Coach Signal, Goregaon (E),
MUMBAI - 400063 (Maharashtra)

Tele Phone : 022-67114444

Fax No : 022-67114445

A.	Name Of the Company :		
B.	i)	Office Address :	1. 2. 3. City: Sate: Pin:
	ii)	Ship to Address : & Tel. Nos. (if any)	
	iii)	Warehouse Address : & Tel. No.	
	iv)	Branches At :	
C.	Telephone Nos. : Mobile No :	Email Id : Birth Date : Anniversary Date :	
D.	Status		
	Proprietorship <input type="checkbox"/>	Partnership <input type="checkbox"/>	Pvt. Ltd <input type="checkbox"/> Public Ltd <input type="checkbox"/>
	Attach Copy in case of :		
	Proprietorship	Shop and Establishment Regn. Certificate	
	Partnership	Partnership Deed	
Pvt or Public Co.	Memorandum and Article of Association		
E.	Name of Proprietor / Partner / Director:		
	Residence Address		1. 2. 3. City: Sate: Pin:
	Telephone No. & Mobile No		

Please attach <u>Self Attested Photograph</u> of Proprietor / all Partners / all Directors along with authorized signatures.		
F	Name and address of Associate : Companies	
G	i) Date of start of Business	
	ii) Sales Tax Regn. No	a) S. T. No. :
		b) C. S. T. No.
	iii) IT PAN No. :	
	iv) Central Excise Regn. No.	
Attach Copy of the above Registration		
H	i) Bankers Names, Addresses & Tel. Nos. of Branch :	
	ii) Bank Account No. :	
	iii) Banking Since :	
	iv) No. of Signatures :	
	v) Specimen Signature :	
	_____ Signatory No. 1 Name :	_____ Signatory No. 2 Name :
		_____ Signatory No. 3 Name :
Signature to be verified by the Bank Managers with Official Seal		
Attach attested Bank Statement for last 6 months		
Attach Extra sheet in case of more than one Bank		
I	Capital employed in business	
J.	Graphical Area Recovered : (If rental attach copy of Rent Agreement)	

	i)	Office Area : _____ Sq. Ft (Ownership / Rental)			
	ii)	Warehouse Area : _____ Sq. Ft (Ownership / Rental)			
K.	I)	Agencies Currently Carried :			
		Company	Major Products	App. Turnover	Days Credit
	II)	References of four parties with whom you are dealing :			
	1)	Names :			Tel. Nos.
		Products :			Dealing Since :
	Business volume last completed Accounting year Rs. _____				
	Average monthly volume in current Accounting Year Rs. _____				
	Credit Limit Rs. _____			Credit Period _____ Days	
	Contact Person Mr. _____			Tel. No. _____ Extn _____	
	2)	Names :			Tel. Nos.
		Products :			Dealing Since :
	Business volume last completed Accounting year Rs. _____				
	Average monthly volume in current Accounting Year Rs. _____				
	Credit Limit Rs. _____			Credit Period _____ Days	
	Contact Person Mr. _____			Tel. No. _____ Extn _____	
3)	Names :			Tel. Nos.	
	Products :			Dealing Since :	
Business volume last completed Accounting year Rs. _____					
Average monthly volume in current Accounting Year Rs. _____					
Credit Limit Rs. _____			Credit Period _____ Days		

Contact Person Mr. _____		Tel. No. _____ Extn _____	
4)	Names :	Tel. Nos.	
	Products :	Dealing Since :	
Business volume last completed Accounting year Rs. _____			
Average monthly volume in current Accounting Year Rs. _____			
Credit Limit Rs. _____		Credit Period _____ Days	
Contact Person Mr. _____		Tel. No. _____ Extn _____	
III	Monthly estimated value of purchases productwise		
	Name of product	Amount	
	AMP		ENERG
	NUMERIC		HCL
	AOC		K 7
	CREATIVE		HP
	ODYSSEY		LINKSYS
	CISCO		MICROSOFT
	DELL		KINGSTON
	RELICELL		TALLY
	TARGUS		TOSHIBA
		Total	Total
L.	Your Financial Details :		
	Current year Turnover from April to _____ Rs. _____		
	Last 3 year's Turnover :	April to March Rs. _____	
		April to March Rs. _____	
		April to March Rs. _____	
	Please attach last 3 years Audited Balance Sheet – with Schedules		
M	Manpower Employed in Business : _____		
	Sales / Marketing : _____	Delivery : _____	
	Service : _____	Others : _____	

	Admin / Accounts : _____	
N.	No. of Retailers / Assemblers currently serviced :	
	Date :	Name :
	Place :	Signature : for Prop. / Partner / Director
Checklist of Attachments :		
1.	Copy of partnership Deed / MOA & AOA / Shop & Establishment Regn. Certificate	
2.	Self Attested photographs of prop. / all Partners / all Directors.	
3	Copy of Sales Tax, Income Tax and Excise Regn. Certificate.	
4	Bankers' Attestation of Signatories & Last 6 months Bank Statement duly attested.	
5	Copy of last 3 year's audited Balance Sheet – with Schedules.	