



National Roadlines

17/3, Mathura Road, Near Delton Cable, Metro Pillar no 740, Faridabad
Haryana – 121002, Ph. 01292285035, 8511511035, 9899085035
marketing@lochiblogistics.com | www.lochiblogistics.com

Application

A. Personal Particulars :

Name of the applicant : Mr. /Mrs./Ms. _____
Father's/Husband's Name : Mr. _____
Date Of Birth : ____/____/19__ Age : _____ Years _____
Residence Address : _____
Pin Code : _____ Ph. _____
Permanent Address : _____

Pin Code : _____ Ph. _____
E-Mail : _____

B. Business Particulars

Bank A/c No.& Bank Name : _____

Details of vehicle owned :

Type Of Vehicle	Year Of Mnf.	Regd. No.

Details of experience in Cargo Industry (if any) : _____

Desired Location: _____

Approx Cargo Business in Part Load:- Rs. _____

Approx Cargo Business in Full truck load Rs. _____

C. Reference Details

Name & Address of 2 persons known to you (but are not your relatives)

01 : Mr./ Mrs./ Ms. _____ S/o D/o : Mr./Mrs. _____

Resident of : _____
Pin Code : _____ Ph. : _____

02 : Mr./ Mrs./ Ms. _____ S/o D/o : Mr./ Mrs. _____

Resident of : _____
Pin Code : _____ Ph. : _____

D. Security Deposit Details

D/draft No. : _____ Dated : _____ Payable At : Faridabad, Haryana

Bank Name : _____ Amount (in fig.) : Rs. _____

Amount (in words) : _____

Certified that the information furnished above is correct to the best of my knowledge and belief and should it be found false on scrutiny, my PDA. appointment (if made) is liable to be terminated without notice.

Date : _____

Place : _____

(Signature of the applicant with stamp)



FAMILY BACKGROUND				
	Education Qualification	Occupation	Dependent	Age
Father				
Mother				
Spouse				
Children				
Brothers				
Sisters				
Family Business :				

AREA DETAILS:
Industrial Area :
Business Type :
Major industries:
Weekly off:
No Entry Area:
Major Products:

Are you working with Any other same company :

If Yes Kindly provide details : _____

How Came to know About National Roadlines Franchise:

- 1: By Web Site. _____
- 2: By Friend (Provide Name) _____
- 3: Referred By National Roadlines Emp. Employee (Provide Details) _____
- 4: By Any Business Associate: (Provide Name): _____
- 5: By Any other source: _____



(FOR OFFICE USE ONLY)

A. Verification of applicant's personal & business date:

B. Office / Site Inspection Report:

C. Verified & Inspected by:

Name: _____ Designation _____

Branch: _____ Date of verification/Inspection: _____

D. BM/AM/RM/Approval: _____

E. Head – Franchise Dev. Approval: _____

STARTING DATE OF FRANCHISE: _____