

N.K.Poddar e-Comm IT

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Web: www.ecommit.in

TERMS AND CONDITIONS TO BECOME A SUB RA

1) MINIMUM STOCK TO OPEN A CONTROL CENTRE IS 100 UNITS.

2) ONCE MONEY TRANSFERRED, CONTROL-CENTRE WILL BE CREATED AND STOCK WILL BE TRANSFERRED AND MONEY WILL NOT BE REFUNDED. BELOW IS OUR BANK ACCOUNT DETAILS, WHERE MONEY CAN BE DEPOSITED: LRAA APPLICATION FORM,

BANK NAME: HDFC

BRANCH ADDRESS: KOLKATA

ACCOUNT NAME: N K PODDAR E COMM IT

ACCOUNT NUMBER: 50200030370906

IFSC CODE: HDFC0000040

OR

Bank Name: Bandhan Bank Branch Address: Kolkata

Account Name: N K Poddar e-Comm IT Account Number: 10170003661845

IFSC Code: BDBL0001574

Below Is LRAA Stamp which is To Be made and Stamped on Official Use Only Section of the Application Form.





Sify address where Forms Would be Send Directly Until Informed By us:

Mr. Amalendu Nandy Sify SafeScrypt Sify Technologies Limited P-3 NEW CIT Road, Tiretti 2nd Floor (Near Central Metro Station Poddar Court Exit) Kolkata — 700 020

LL: 91 33 4003 5113



Sify | Safescrypt LRAA Application form

Submitted by

Sify Technologies Limited

Version 1.0, 15th May, 2012



Document Information

Document Details

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Document Reference	SIFY/Safescrypt/LRAA/May 2012
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Nature of Busines Retail	<u> </u>	Enterprise				ME	БОНО /		
Retair		Enterprise			OTHER				
1									
Name of Organ	ization :								
Address – 1:				Address-2 : (If any)					
Phone:	Fax:				email:				
Tiels which areas one	ali a a bala								
Tick whichever app Pvt Ltd:		Public Ltd:		Partnership:			Other's:		
	1 4 4 7 1			Tarthership. Other 5.					
Name of Key	Desig	nation	e-ma	ail id			Contact		
Person's (Own								Phone/Mobile	
Director)									
Mandatory Fields									
Company regis VAT / Sales Ta									
Year of Incorp		x number :							
Tear of Incorp	oration :								
					Office			Computer	
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					(Sq.Ft)		(Qty)	(Units)	
Head Office	1 (TP 11 1 1	`							
Branch Office-1 (If applicable) Branch Office-2 (If applicable)									
Dranch Unice-	2 (11 applicabl	e)							
Whether famili	iar/associated	with DSC h	usine	ss – Yes	/ No				
				- 50	-				
If yes, with whi	ich CA (Certif	ying Author	rity) -	•					



(Few words describing about your	r company strengths / achieveme	nts / business goals)				
Name of the LRAA operator (Need to obtain class 3 certificate from Sify)						
Sify LRA Recommendation						
(Recommendation for appointment with justification)						
Authorized Signatory of LRA (Director/Owner) Signature & company seal						
Sify Channel Manager Recommendation (Recommendation for appointment with justification)						
Date of Visit & location :						
I have understood all the terms and (Safescrypt CA) and will abide to the		nce of Sify Technologies Ltd				
Name:	Signature & Company seal:					
(LRAA's Authorized Signatory) Date: / /2012						
Note: Kindly attach company profi		assport size photo				