# BAHUVIDA™
## MISSION TOMORROW

# BAHUVIDA LIMITED
# AGENT ENROLLMENT FORM

☐ Creation
☐ Modification

| | |
|---|---|
| Name of the Agent/Firm * | |
| Address * | |

| | | | |
|---|---|---|---|
| City/Town * | | State * | |
| Telephone/Mobile No. * | | PIN Code * | |
| WhatsApp No. * | | Gmail ID * | |

**Legal Status of the Agent *** (Pls tick where applicable)

☐ LIMITED  ☐ PVT LIMITED  ☐ PARTNERSHIP  ☐ PROPRIETORSHIP  ☐ INDIVIDUAL
☐ PSU  ☐ CO-OP SOCIETY  ☐ HUF  ☐ OTHERS

**Nature of the Agent *** (Pls tick where applicable)

☐ FARMER  ☐ COMMODITY SUPPLIER  ☐ SERVICE PROVIDER  ☐ MANUFACTURER  ☐ CANVASSING AGENT/BROKER
☐ EMPLOYEE  ☐ CAPITAL ASSETS  ☐ GOVT BODY  ☐ PROCESSOR  ☐ OTHERS_____

## STATUTORY DETAILS

| | | | |
|---|---|---|---|
| PAN No. of the Agent/Firm * | | (Mandatory if TDS is applicable) | |
| Type of Service | 1 | | |
| **With Tax Type** | 1 | Select ▼ | Select ▼ |
| **With Hold Tax Code** | 1 | Select ▼ | Select ▼ |

(If exempted from TDS, please provide exemption certificate)

| **Are you Registered Under #** | GST No | ☐ YES  ☐ NO | MSM Act | ☐ YES  ☐ NO |
|---|---|---|---|---|
| | Registration No. | | Regn No. | |
| | | | Date | |

(In case Party gets registered under MSM Act (Micro, Small and Medium Enterprises Development Act), subsequently, Party has to provide the registration details under that Act. If no details are provided by Party, it shall be assumed that Party is not covered under this Act.)

## BANK DETAILS

| | | | |
|---|---|---|---|
| Bank A/c. Holder's Name * | | | |
| Bank Name * | | Branch Name * | |
| Account No. * | | A/C Type * | ☐ CURRENT  ☐ SAVINGS  ☐ CASH CREDIT |
| IFSC Code * | | Branch Code * | |
| Address of the Bank * | | | |
| Branch Location/City * | | State * | |

Please enclose a copy of Cancelled Cheque of the above mentioned Bank Account showing Account Number, IFSC Code, Name of the Account Holder. In case cheque is not available, a copy of the Bank Pass Book (or) Certificate from the Bank confirming above details may be provided.

I/We hereby declare that the particulars furnished above are correct and complete. The financial information provided above is to be used by BAHUVIDA LIMITED for making payment through electronic mode. I request and authorize BAHUVIDA LIMITED to effect payment through electronic mode to my/our Bank Account as per the details mentioned above. If any transaction is delayed or not effected at all for reasons of incompleteness or incorrectness of information provided as above or any error made by the Bank(s), the Company BAHUVIDA LIMITED shall not be held responsible. I/We hereby undertake to inform the Company immediately of any change in my/our Bank (or) Branch and Account Number.

**No column to be left Blank. All of the provided Documents should be legible to ensure correctness of the details as specified above.**

| Signature | | Name: | | | Seal of the Firm (if the Agent Enrolled as a Company) |
|---|---|---|---|---|---|
| | | | Date | | |
| | | Designation: | Place | | |

## FOR OFFICIAL USE ONLY (to be filled-in by BAHUVIDA LIMITED's Agents Recruitment Officer)

| Approver Name 1 | | Approver Name 2 | | Agent Code | |
|---|---|---|---|---|---|
| Signature & Date | | Signature & Date | | Created By & Date | |

## Mandatory to Fill in the Details & Form Submission

After filling the Form, the Agent shall double-check the details before taking final printout of the filled form. The Form shall be submitted to the company through an official email at: **mail@bahuvida.co.in** along with the supporting documents such as: Aadhar Card, PAN Card, TAN Certificate, Firm Registration, GST Registration ect... only in the PDF format, each PDF shall not exceed maximum 1MB size.