

DATE:



SADASYA SEWA SAVING & CREDIT CO-OPERATIVE LTD.

Head Office:-
Ka.Ma.Na.Pa-32, Koteshwor
Contact:- 01-5099098/5199479

Service center:-
Ka.Ma.Na.Pa-14, Kuleshwor
Contact:- 01-5165214/5165231

MERCHANT ACCOUNT DETAILS

BUSINESS INFORMATION

Business Pan Number	<input type="text"/>		
Business Name	<input type="text"/>		
Address	<input type="text"/>		
Email id	<input type="text"/>		
District	Zone	<input type="text"/>	
Work Phone	<input type="text"/>	Ext	<input type="text"/>
Category	<input checked="" type="checkbox"/> Merchant <input type="checkbox"/> Transportation <input type="checkbox"/> Education <input type="checkbox"/> ISP <input type="checkbox"/> Insurance <input type="checkbox"/> Bank <input type="checkbox"/> Finance <input type="checkbox"/> Recharge Card <input type="checkbox"/> Entertainment <input type="checkbox"/> Others (Specify): <input type="checkbox"/> Ecommerce <input type="checkbox"/> Donation		
Sales Venues	<input checked="" type="checkbox"/> E Sewa <input type="checkbox"/> Other Market Place <input type="checkbox"/> Others <input type="text"/>		

BUSINESS CONTACT INFORMATION

Name	<input type="text"/>		
Phone	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		
Pan Number	<input type="text"/>		

Business Owner CONTACT INFORMATION

Name	<input type="text"/>		
Phone	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		
A/C Number	<input type="text"/>		

Alternate Business CONTACT Person INFORMATION

Name	<input type="text"/>		
Phone	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		
Job Title	<input type="text"/>		

Staff Name:

.....

Authorizes Signature

Checked By

Signature: