Master dealer, Super Dealer, Area Distributor and Distributor Registration Form

Name: - _____

Address: _____

_____

Father Name: - _____

Company Name: - _____

Working Mark :- **Area Distributor [ ]**

Distributor [ ]

Master Dealer [ ]

Super Dealer [ ]

Bank A/C NO - _____	**USER-ID -** _____
Bank Name - _____	**IFSC Code -** _____
Reg. Mail Id - _____	**Joining Date -** _____
Under Reference / Joining: _____	

1. *If user found any problem related to work then he/she have to inform to the company with 30 days by registering/mailing to the valid id of the company.*
2. *If user fail to complain within 30 day and if he/she is complaining after 30 day then his/her complain will not be considered until and unless with the valid reason.*
3. *If your complain is considered then the loss through which you are suffering will not be covered because company might also get suffer from your deeds. Then the company will take some time to cover this loss.*

Company Signature **Employee Signature**

KUBER ENTERPRISES