

## VICOM APPLICATION FORM

### VICOM SECURITY (P) LTD.

8 Beckbagan Row, 2nd Floor, Kolkata - 700 017  
 Ph: 033-2287 2290 / 91 / 93 Fax: 033-2287 2294  
**Website:** www.vicomsecurity.com



*An ISO 9001 : 2000 Certified Organisation*

#### VICOM CERTIFIED PROJECT PARTNER ( VCPP )

Organization Name:

Address:

Year of Establishment:

Type of Organization: Proprietary / Pvt. Ltd / Public Ltd

Telephone Nos.

Mobile Nos.

Fax No.

E-mail ID :

#### CONTACT DETAILS OF PROPRIETOR / PARTNERS / DIRECTORS

Name/s: 1. \_\_\_\_\_ 2. \_\_\_\_\_  
 3. \_\_\_\_\_ 4. \_\_\_\_\_

Address: 1. \_\_\_\_\_  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_  
 4. \_\_\_\_\_

Mobile Phones : 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

#### FINANCIAL DETAILS

Turn Over of the Company for the last 03 years (Please attach the Balance Sheet of the company)	Year	2009-10	2008-09	2007-08
	Amount(Rs)			

#### CURRENT BUSINESS DETAILS

Details of Products /Systems Dealing with (please specify brands)

#### PRESENT STAFF PROFILE

	Directors	Administration	Marketing & Sales	Service Engineers / Technicians
No of Staff / Employees				

#### MARKETING TERRITORY

Locations where Sales Team is present ( Cities )

Branches across India

Desired Territory for promoting VICOM products :

List of Major Clients: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_  
 5. \_\_\_\_\_ 6. \_\_\_\_\_ 7. \_\_\_\_\_ 8. \_\_\_\_\_

Name of the applicant:

Designation:

Dated:

*For internal use*

Signature with seal of the company