



Manufacturers of World Class
Security, Fire & Automation Systems

SECURICO ELECTRONICS INDIA LIMITED DEALER INFORMATION FORM

Company Name: _____

Contact Person: _____ Designation: _____

Registered Address: _____

City: _____ State: _____ Pin: _____

Telephone: _____ Mobile: _____ Fax: _____

Email: _____ Website: _____

Alternate Mobile: _____ Alternate Email: _____

Shipping/Billing Address: _____

City: _____ State: _____ Pin: _____

Telephone: _____ Mobile: _____ Fax: _____

Year of Establishment: _____ No. of years in electronic security business: _____

Date of Birth: (DD/MM/YY) ____ / ____ / ____ Date of Wedding Anniversary: (DD/MM) ____ / ____ (Year not required)

Preferred Method of Communication: Email Telephone Courier

Preferred Language of Communication: English Hindi

Turnover (in lakhs)-2009-2010: _____ 2010-2011: _____

Owner Ship Type: Public Limited Private Limited Partnership Proprietary

Please enclose copy of Article of Association in case of Company / Partnership Deed in case of Partnership/IT Return in case of Proprietorship / ID proof of the owner.

Details of Directors / Partners / Owners:

1) _____ Mobile No.: _____

2) _____ Mobile No.: _____

3) _____ Mobile No.: _____

Total no. of employees, Sales: _____ Service: _____ Administration: _____

Existing Product / Services Range: _____

Company Profile: *(Please attach separate sheet if necessary)*

CST No.: _____ LST No.: _____ TIN No.: _____

I certify that all information given above is true and correct to the best of my knowledge.

Name: _____

Signature: _____

Designation: _____

Date: _____

Official Seal:.....

Please complete and return along with necessary documents to:
SECURICO ELECTRONICS INDIA LIMITED, Securico House, Plot. No. 4, 14/3, Delhi Mathrua Road, Faridabad - 121003, Haryana, India
Tel.: 0129 - 427 0000 (100 Lines), Email: info@securicoelectronics.com

DETAILS OF SALES DEPARTMENT

NAME OF THE CONCERNED PERSON :

E MAIL ID OF CONCERNED PERSON:

MOBILE NO :

TEL NO.

DETAILS OF ACCOUNTS DEPARTMENT

NAME OF THE CONCERNED PERSON :

E MAIL ID OF CONCERNED PERSON:

MOBILE NO :

TEL NO.

DETAILS OF PURCHASE DEPARTMENT

NAME OF THE CONCERNED PERSON :

E MAIL ID OF CONCERNED PERSON:

MOBILE NO :

TEL NO.

DETAILS OF TECHNICAL DEPARTMENT

NAME OF THE CONCERNED PERSON :

E MAIL ID OF CONCERNED PERSON:

MOBILE NO :

TEL NO.
