

NEW AGENCY AGREEMENT APPLICATION FORM

Date: __/__/____

SALES EXECUTIVE NAME (AZIZI): _____

Name of Company/Individual: _____

Trade License/Passport No.: _____ **TAX REGISTRATION NO (TRN):** _____

RERA Reg.No: _____

COMPLETE ADDRESS (for communication by courier (MUST BE COMPLETE; OFFICE NUMBER, BLDG NAME / NO, STREET NAME/NO. CITY, COUNTRY, PO BOX/ZIP CODE) _____

Post Box No.: _____ **City:** _____ **Zip/Postal Code:** _____ **Country:** _____

Phone: _____ **Mobile:** _____ **Fax:** _____

Official Company Email: _____

Name of **Authorized Signatory (with Power of Attorney Certificate):**

Mr. /Mrs. _____

(As per passport) **First Name**

Middle Name

Last Name

Designation: _____ **Nationality:** _____

Mode of Payment: **Bank Transfer**

Bank Account Details of Agent / COMPANY BANK DETAILS FOR AGENCY: (if its bank transfer)

Account Number: _____ **Name of Bank:** _____

Bank Branch and Address: _____

Swift/Sort Code: _____ **Currency of Account:** _____

Beneficiary Name: _____

IBAN: _____

I do hereby declare that I do not have any relatives or members of my family within the third degree either of consanguinity or of affinity who is/are connected/employed with Azizi Developments as either employee/job order contractor.

Signatory & Company Stamp

*For Individual, please ignore not applicable information