

BUSINESS ENQUIRY FORM

NAME

SEX

DOB

FATHERS NAME

EDUCATION

ADDRESS

PAN

AADHAAR

WIDOW

YES/NO

PHYSICALLY CHALLENGED

YES/NO

SC/ST

YES/NO

ANNUAL INCOME

BUSINESS MODEL

INTERESTED

CSK KIOSK 8X6 / CSK CONTAINER 20X8 / CSK STORE / CAFÉ 6AM

INTERESTED LOCATION

PREMISES IDENTIFIED

YES/NO

IF YES, ADDRESS

SIGNATURE & DATE

ENCLOSE

COPY OF AADHAAR

COPY OF PAN

COPY OF WIDOW / SC/ST / PHYSICALLY CHALLENGED CERTIFICATE