

LAKHDATAR ASHRAY NIDHI LIMITED लखदातार आश्रय निधि लिमिटेड

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HELP LINE NUMBER 0512 - 3100273					

Registered Office - 122/690 "B" Shastri Nagar, Kanpur - 208005 U.P.

CIN NO - U64990UP2023PLN181688, PAN NO - AAFCL3947H, TAN NO - KNPLO1566F, GST NO - 0 info@lakhdatarnidhi.com					
To, The Director Lakhdatar Ashray Nidhi Limited Dear Sir/Madam	Photo				
I am hereby desire to apply Rs. 50/- for membership in your company share 10 (Rs. 10) each I am giving my full Particulars below and anneced Required documents along with form.					
1. Member Details Title					
PAN/GIR No. Form 60/61 (IT ACT) 2. (A) Correspondences Address	Y				
House No. Apartment/Building Name Road/ Street/ Lane Landmark P.S. Post District District Phone With STD Code Fax No. Mobile E mail ID	n				
2. (B) Permanent Address					
State Country Pi Phone With STD Code Fax No. Mobile E mail ID					

Name of the documents Document No.	3. (A) Proof of Identify
Place of Issue	Name of the documents
3. (B) Proof of Address Name of the documents	Document No. Issued by
Name of the documents Document No.	Place of Issue Date of Issue
Document No.	3. (B) Proof of Address
Place of Issue	Name of the documents
4. Account Details Account No. Branch Branch Branch Branch Branch Branch Branch Branch Passport No. Branch Passport No. Branch	Document No. Issued by
Account No. Branch IFSC Code PAN IFSC Code PAN PAN Passport No. Passport No. Passport No. Passport No. Professional Other Total Monthly Family Income Patalls Cocupation Salaried Self Employed Agriculturist Professional Other	Place of Issue Date of Issue
Branch	4. Account Details
PAN Passport No. Passport No. Passport No. Professional Other Total Monthly Family Income Passport No. Professional Other Total Monthly Family Income Passport No. Professional Other Total Monthly Family Income Passport No. Professional Other Other Professional Other Other Other Other Other Oth	Account No. Bank
5. Income Details Occupation Salaried Self Employed Agriculturist Professional Other Total Monthly Family Income 6. Nominee Details Name Relationship Age House No. Apartment/Building Name City/ Village P.S. State Country Pin Mobile Email ID Fax No. Mobile Email ID Date Place Member signature/Thumb Impression	Branch IFSC Code
Occupation Salaried Self Employed Agriculturist Professional Other Total Monthly Family Income 6. Nominee Details Name Age House No. Apartment/Building Name Landmark Street/ Lane District State Country Pin Phone With STD Code Fax No. E mail ID 7. Declaration The above information is true to the best of my knowledge and in the even of if it being found false company would be within its right to take any disciplinary action against me. Date Date Place Member signature/Thumb Impression	PAN Passport No.
Total Monthly Family Income 6. Nominee Details Name	5. Income Details
6. Nominee Details Name Relationship House No. Road/ Street/ Lane City/ Village Post District State Phone With STD Code E mail ID Date Place Member signature/Thumb Impression	Occupation Salaried Self Employed Agriculturist Professional Other
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Relationship	6. Nominee Details
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City/ Village P.S. Post District Property Proper	House No. Apartment/Building Name
Post	Road/ Street/ Lane Landmark Landmark
State Country Pin Pin Mobile Fax No. Mobile E mail ID Fax No. Mobile E mail ID Date Place Member signature/Thumb Impression	City/ Village P.S. P.S.
Phone With STD Code Fax No. Mobile E mail ID Fax No. Mobile The above information is true to the best of my knowledge and in the even of if it being found false company would be within its right to take any disciplinary action against me. Date Date Place Member signature/Thumb Impression	Post District District
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Date Place Member signature/Thumb Impression	
	Date Place Member signature/Thumb Impression
Verified by	Verified by
Code	Code

T & C APPLIED

- 1. The Membership ID Number is not transferrable or assignable.
- The Company will be at the discretion to suspend cancel or terminate acting contrary to the aims and object of the company.
- 3. All payments for the products of the company should be in demand draft (DD) or cash. All Demand draft (DD) should be in favor **LAKHDATAR ASHRAY NIDHI LIMITED**.
- 4. The Company will not be responsible if the payment are made using a wrong name and an Incorrect address or to any person other than the company.
- 5. Member is allowed to display the name, official logo of the company. ID No. gave by the company on the personal stationary which will be used for the business purpose of printing his/her personal stationary [with prior permission] however the business Associate shall not use the Trademark.
- 6. Member aged 18 or above in only eligible to become Associate in business plan promoted by the company.
- All the Guidance rules published by the company which will be published front time to time, shall always be binding on all share holders members.
- **8.** The company shall surely be the liberty to change amend add or delete object offer ruler and guidelines without giving any prior notice to all the members.
- The member shall not include in any act. Which may cause harm or damage to the company and it's objects, business promotion scheme, plan or any other activity.
- 10. Due to change any law or rules of local body, stte or Central Government in future the company shall be to liberty to change the entire scheme and/or business plan either in whole or in part without any prior notice to the member.
- 11. The Member within the four corners of rules, terms conditions and guidelines shall take all positive steps to promoter the business plan any/or activity of the company and further provide supervision and training to the team which should include ongoing contrat communication encouragement and support.
- 12. Any member who will promote and sale the products of the company shall be entitled to receive the incentive from the company directly.
- **13.** Any member cannot work simultaneously in the same field in other company and if found doing so, then his members code all the facilities payments and gift will be canceled without any notice.
- 14. In case of death of a member the lawful nominee will be the only one entitled to receive the benefits as enjoyed by the late member and he/she will be bound by all the existing and future terms and conditions, rules and regulations guidelines framed by the company.
- **15.** Nominee of the deceased shall inform (in writing) the company about his/her interest to continue with the company failing which all his benefits with be frozen by the company.
- **16.** In case of any disputes in interpretation of any terms and conditions or meeting of any rules terms and conditions shall be referred to the sole arbitration appointed by the company as per the provisions of the arbitration act. The decision of the arbitrator shall be final and binding on all parties.
- **17.** Filed allowances, development expenses, commission and all declared offers will be canceled and unclaimed for you if you are not full your target business. This is a contractual agreement.
- 18. All disputes claims arbitration is subject to law & Jurisdiction of the Kanpur Court Only.

DECLARATION. PROMISES & IDEMNITY

I have not been declared insolvent. In case of any dispute whatsoever the decision will be taken by the arbitration duly appointed by the company, I agree to abide by all the term & conditions mentioned above (also in website) and circulars issued till date or those to be issued by the company from time to time.

Date	Place	Member Signature

नोट - कम्पनी किसी भी प्रकार का नगद लेन-देन नहीं करती है।