DIRECT SELLER APPLICATION FORM

ITSPOSSIBLE NUTRACEUTICALS LIMITED
WZ-114, 1st Floor, Meenakshi Garden,
Near Subhash Nagar Metro Station,
New Delhi 110018
Mob: +91 85 8888 2345
Email: support@mfadirect.com
CIN: U24297DL2012PLC2333327

MFA DIRECT™

APPLICANT INFORMATION

☐ Individual ☐ Sole Proprietorship* ☐ Partnership firm* ☐ Private Limited Company* ☐ Others* _____ (please provide details) **Please tick (✓) your category.** (Please provide relevant documentation. Please confirm applicable conditions are met before selecting – click here)..)

Kindly give the name of the legal entity (the "Entity") formed solely to operate your MFAdirect Business. (not for individual joining)

Name of the Primary Applicant / First Authorised Representative (in case of entity)

First Name | Middle Name | Last Name

Name of the Co-applicant / Second Authorised Representative (in case of entity)

First Name | Middle Name | Last Name

Date of Birth of Primary Applicant DD MM YYYY

Gender of Primary Applicant Male Female Other

Date of Birth of Co-applicant DD MM YYYY

Gender of Co-applicant Male Female Other

Name of the Primary Applicant as desired on ID card (max. 20 characters including space)

Name of the Co-applicant as desired on ID card (max. 20 characters including space)

ADDRESS DETAILS

Please provide your complete postal address with pin code and attach a valid address proof along with this application form. Your application will be rejected without valid address proof. *Click here to see what is acceptable.*

Mailing Address

Mailing Address / Locality

City / Town / Village (Mandatory)

Post office (In case of village, Mandatory) **District**

PIN Code (Mandatory) **State** (Mandatory)

Telephone (Residence) STD Code & Phone Number

Telephone (Office) STD Code & Phone Number

Mobile No. (Mandatory)

E-mail address:

Photo Identity Proof (Attach photocopy)

☐ Election Card ☐ Driving License ☐ Passport ☐ Ration Card ☐ UID / Aadhar Card ☐ Any other _____

DETAILS OF BANK ACCOUNT ("Must be a Rupee Denominated Account")

A/c details of the Primary Applicant / Legal Entity.

Bank Name | Your Account Number

IFSC Code

Branch Address:

Please provide cancelled cheque which should have the account holder's name, bank account number and IFSC code of the bank. In case the cheque does not have the account holder's name, additionally please provide any other attested bank document which verifies the account holder name, bank account, and IFSC code of the bank.

PERMANENT ACCOUNT NUMBER (PAN) DETAIL

Applied for ☐ **Individual PAN No.** (Personal PAN Details of the Primary Applicant) **Sole Prop. / Partnership / Pvt. Ltd. Co. PAN No.** (PAN Details of the entity formed solely for the MFAdirect Business)

RESIDENCY STATUS

Primary Applicant / First Authorized Representative. Please tick (✓) one

☐ Citizen and resident of India ☐ NRI/PIO/OCI**

Co-applicant / Second Authorized Representative. Please tick (✓) one

☐ Citizen and resident of India ☐ NRI/ PIO/OCI**

** In case of NRI/POI/OCI, please provide relevant documentation & proof of entitlement to do business in India.
** The Applicant(s) confirm(s) & undertake(s) that they will change in residency status.

LINE OF SPONSORSHIP

Identify the Direct Seller who will be your Sponsor

Username of your immediate sponsor

First Name of the Immediate Sponsor | Surname of the Immediate Sponsor

I acknowledge that I have read & further agree to abide by the terms & conditions stated on the website www.mfadirect.com

/ / Date

Signature / Thumb Impression* of Primary Applicant
(Authorised signatory of Proprietary concern / Partnership / Company)

/ Date

Signature / Thumb Impression* Co-Applicant

*Thumb Impression needs to be placed in presence of an MFAdirect Executive.

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