



Reseller Partner / Distributorship Form

Leader for GPS Tracking

<p>We are interested in becoming distributor for the i-Diagnosis GPS Tracking solutions. Details of our present business and other related information is being given below. Please consider our proposal for distributorship/ reseller partner for i-Diagnosis GPS solutions and let us know the further action for the same</p>					
*Name	First		Last		
*Company Name					
*Company Type (Tick one which is relevant)		Proprietorship		Private Limited	Public Limited
*Details of the present business					
*Current Annual Turnover (Last Financial year)					
*Number of Technical Manpower			*Number of Sales Personnel		
Contact Details					
*Office Phone number(s)					
Cell Phone number(s)					
FAX Number					
*E-mail 1					
E-Mail 2					
I / We are interested in (Please indicate the choice- Hardware devices or software or total solution and particular industry vertical, if any)					
<p>We agree to receive product details from i-Diagnosis Technologies from time to time and also for contacting us by i-Diagnosis Technologies for the products from time to time</p>					
Date:				Name and Signature	

*Denotes Compulsory information

i-Diagnosis Technologies

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