



Project Application Form – KSHETRA-1

(Layout Portion)

If individual

Name*		Father's Name*	
PAN No*		Aadhaar Number*	
Mobile No*		Telephone Number*	
FAX Number		E Mail*	
Occupation		Address Line 1*	
State*		Address Line 2*	
Pin code*		District	

If it is a firm

Name of the Firm / Company*	M/S ADINATH SRINIVASA FOUNDATIONS LLP	Copy of the Registration Certificate*	Enclosed
Address*	T2 1 ST FLOOR, SAYEE APARTMENTS, NO.31 RAJAMANNAR STREET, T.NAGAR CHENNAI 600 017	Name and Photograph and address of Chairman or the Governing Body / Partner / Director etc.,*	1) Anil Kumar Seth 2) Jitendra Bhandari PHOTOGRAPHS PASTED
			
			

Mobile No*	
Telephone No	044 28151857 / 58
FAX Number	
E Mail	info@adinathfoundat ions.com
State*	TamilNadu
Pin code*	Chennai 600 017

Main objects*	Partnership Deed enclosed

Previous Project Details (Last 5 Years only)

Project Name*	- NIL -
Current Status	- NA -
Category of Building	- NA -
Is there any Case Pending	- NA -
Address	- NA -

Project Description (Max 500 Characters)	- NA -
State	- NA -
District*	- NA -
Pincode	- NA -