



SCHEDULE A

SALES PARTNER REGISTRATION FORM

** All fields are required*

Status of Applicant * (tick whichever is applicable)

Sole Proprietorship

Partnership / AOP

Company

1. Firm Name *

2. Year of Establishment *

3. Name of Proprietor / CEO / Lead Partner *

4. Full Address *

5. Mobile No. *

6. Email *

Important

RUDA reserves the right to require any additional information, documents, or clarifications deemed necessary to complete the registration process in accordance with its applicable Regulations, Policies, and procedures. The applicant shall also be required to pay a registration fee to the Authority for completion of the registration process. The applicable fee shall be communicated by RUDA at the appropriate stage.

For Queries & Registration Assistance

Call: 0345-4994474 | **WhatsApp:** +92-305-9529003

Email: customerservices@ruda.gov.pk | **Web:** <https://ruda.gov.pk/>