**PARTNERSHIP DEED**

**(PLEASE FILL FOLLOWING DETAILS IN CAPITAL LETTERS)**

|  |  |
| --- | --- |
| **1.         Name of the firm** |  |
| 2.         **Nature of Business** |  |
| **3.         Location/ Complete Address of Firm****Shop/ Flat No.****Building Name & No.****Street Name,****Area:****Pin No.** |  |
| **4.        Contact details of any of the Partner****Email ID****Mobile No.** |  |
| 4.         **List of Partners** |  |
| **Details of Partner 1**Full Name in Capital Letters:Residence Address:**Details of Partner 2**Full Name in Capital Letters:Residence Address: |  |
| **6.         Date Of Commencement of****Partnership** |  |
| **7.         Total Capital** |  |
|  |  |
| **8.         Ratio of Profit/ Loss in %** |

|  |  |
| --- | --- |
| Partner Name | **%** |
|  |  |
|  |  |
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|  |  |
| **9.**       **Names of** **Working Partners**Please note only working partners are eligible for Remuneration. | **1.****2.****3.****4.** |
| **10.      Bank Operation (Please Tick)** | Any One / Any Two Jointly / By Both |