



OJA OBA ADO EKITI APPLICATION FORM

NAME OF SUBSCRIBER (S): _____

CONTACT ADDRESS: _____

EMAIL: _____

NEXT OF KIN: _____

CONTACT ADDRESS/TEL: _____

EMAIL: _____

SHOP TYPE & NO: _____

- Bank A Bank B Lockup shops - Type A Lockup shops - Type B
- Lockup shops - Type C Lockup shops - Type D Shopping malls
- Warehouse Type A Warehouse Type B Cold Store
- Canteen Open Stalls

SELLING PRICE: _____

CHEQUE/ BANK DRAFT NO: _____

HOW DID YOU HEAR ABOUT OJA OBA, ADO MARKET? Flyer Banner Referral

SUBSCRIBER'S SIGNATURE /DATE _____

SALES MANAGER COMMENT/SIGNATURE
