



Form: 114

## REQUEST FOR IIAM NEGOTIATION SERVICES (Deals)

Name of Company : \_\_\_\_\_

Address / Tel / Fax : \_\_\_\_\_

Person / Persons authorized or : \_\_\_\_\_  
in charge of the company

Tel / Mobile / Email : \_\_\_\_\_

With whom business deal : \_\_\_\_\_  
to be made

Person in charge : \_\_\_\_\_

Nature of business deal : \_\_\_\_\_

Whether any previous negotiation: \_\_\_\_\_  
done (if yes; details)

Additional points of relevance : \_\_\_\_\_

We state that the details given above are true and correct and based on records and our personal knowledge.

Date:

Name & Signature:

- Attach separate sheets, if required.
- To institute proceedings, please send three copies of this Request, with the appropriate registration fee as provided in the IIAM Rules.