

| FROM | TO |
|------|--|
| | M/s Shree Plan Your Journey Private Limited A/211, Dalamal Tower, Free Press Journal Marg, Nariman Point, Churchgate, Mumbai 400021 Tel: 022 49210400 |

UNDERTAKING BY FRANCHISEE

I / We _____
 Son / Daughter / Wife of _____
 Proprietor / Partner of _____
 having office at _____

I / We wish to be registered with IRCTC as a sub agent of Principal Agent, Shree Plan Your Journey Private Limited, Mumbai. I / We will honor and comply with all relevant laws, including, on E-tickets, and will work with complete fairness and transparency. I / We will act in conformity with all relevant agreements / pacts entered into between IRCTC and Shree Plan Your Journey Private Limited from time to time.

I also hereby declare that I am not registered with any other principal agent of IRCTC and have not sent my details to any other principal agent for IRCTC registration. If my statement is found to be wrong or incorrect, my ID may be blocked by IRCTC.”

Further, I / We solemnly affirm that:

1. I / We will commit myself / ourselves to take all measures necessary to prevent corruption.
2. I / We will not overcharge for E-tickets.
3. I / We will not use wrong ID.
4. I / We will not charge extra for cancellation of tickets.
5. I / We will not tamper with software, will not manipulate ERS and will not share the agent IDs.
6. I / We will display service charges, payment gateway charges, registration certificate, on signboard.
7. I / We will not advertise in print or press media without prior permission from IRCTC in writing.
8. I / We will not use IRCTC LOGO without prior permission from IRCTC in writing.
9. I / We will keep Requisition forms taken from customers and store in Electronic Form. The details will be provided to IRCTC as and when required.
10. I / We will not file false TDR claim.
11. I / We will not book tickets other than from my registered address in IRCTC.
12. I / We shall provide with the service tax registration copy.
13. I / We shall provide the reason for the non-possession of Service Tax No. for the respective financial year.

Agreed and Signed

Signature: _____

(Affix Rubber Stamp)

Name: _____

Firm' s Name: _____

Franchisee ID (FID): _____

RMN/ID No: _____

PAN No.: _____

Email ID: _____

Address: _____

Date _____