

Checklist for Sales Team Member Opening Distributorship

Particulars	Yes	No
<b>Distributorship Form</b>		
14 Mandatory fields on Page 1 filled up	✓	
4 Mandatory fields on Page 2 filled up	✓	
3 Mandatory fields on Page 3 filled up	✓	
6 Mandatory fields on Page 4 filled up	✓	
4 Mandatory fields on Page 6 filled up	✓	
Signature of representative added on Page 1	✓	
Photograph of representative affixed on Page 1	✓	
Signature of representative added on Page 2	✓	
<b>Supporting Documents</b>		
ID Proof (Aadhaar Card/ Passport/ Driving License)	✓	
Name on ID proof tallies with PAN	✓	
Signed and stamped	✓	
Signed copy of Address Proof (Aadhaar Card/ Passport)	✓	
Name on address proof tallies with ID Proof	✓	
Address on address proof tallies with PAN / License	✓	
Signed and stamped	✓	
Signed copy of PAN	✓	
Name on PAN tallies with ID proof	✓	
Signed and stamped	✓	
Signed copy of GST Certificate (if applicable)	✓	
Name on Certificate tallies with ID Proof	✓	
Signed and stamped	✓	
Signed copy of Seed License	✓	
Name on license tallies with ID Proof	✓	
License is valid on the date of form	✓	
If not, proof of application for renewal has been collected	✓	
Signed and stamped	✓	
Statement of primary bank account(s) of business	✓	
Name on account tallies with ID Proof	✓	
Period is for last 3 months	✓	
Primary bank account of business with significant transactions	✓	
Signed and stamped	✓	
Blank Cheques	✓	
3 cheques	✓	
Not of any cooperative banks	✓	
Contains valid signature of representative and stamp	✓	
Contains no date	✓	
Is not crossed	✓	
Security Deposit has been collected	✓	
Effect on Existing Network		
Name of the nearest distributors (can be more than 1)		
Distance from the nearest distributors		

<b>Approved By:</b>	Signature of Company Official
Name of Company Official	

For Use

1	14 Mandatory fields
2	4 Mandatory fields
3	3 Mandatory fields
4	

15. The Distributor paying through cheque must ensure that the cheque issued by him is honored on the date of the invoice. The company may dishonor the cheque for reasons related to "Insufficient funds" or "Account closed". The company will levy a cheque Dishonor charge on the Distributor without prejudicing its right to sue.
16. The company will provide a standard credit period of 60 days from the date of the invoice. The company may levy interest on Overdue payments. Schemes applicable for the period. Dues remaining unpaid above 180 days will be considered as Overdue.
17. The company will generally not accept any Sales Return unless the material supplied were damaged in transit. However, for select products, the company allows Sales Return within certain limits and under certain conditions. The details of which are usually provided in the Price List. The Distributor is required to follow the terms of this policy for matters relating to Sales Return and obtain prior approval from the responsible sales official before dispatching material. The company will not provide any credit for material returned in violation to its Sales Return policy.
18. The Distributor is required not to enter into any financial transactions with any member of the sales team, either in the form of material or funds. All such transactions will be considered as personal and unsanctioned and the company will not be liable for the outcome of such transactions.
19. The Distributor will not handover any material to any member of the sales team without specific written instruction issued by the Head Office of the company.
20. The Distributor is required to maintain the integrity of the packaging in which the products are supplied by the company at all times and is required not to tamper with the packets, designs, logos and trademarks of the company in any way. Any unauthorized use of the company's designs, logos and trademarks will be counted as an infringement of the intellectual property rights of the company.
21. The Distributor is required to comply with all requirements of GST as applicable to him, related to periodic Returns, Credit Notes and others with respect to its transactions with the company. Further, the Distributor may be required to share with the company, upon request, documents supporting compliance of such requirements of GST.
22. The company will share with the Distributor, an Account Statement at the end of every 6 months either on his registered email or through any other preferred mode of communication. However, the Distributor can ask for his updated account statement at any time by sending email at [customer\\_care@universalagri.in](mailto:customer_care@universalagri.in) or by calling the Customer Care Helpline at +91 8336929400.
23. The company will share with the Distributor, a Confirmation of Accounts at the end of each financial year either on his registered email or through any other preferred modes of communication. The Distributor is required to review the account statement and reconcile the balance on the statement with the balance in his books of accounts. Upon completion of review, the Distributor will be required to sign and seal on the Confirmation and hand it over to the TSM.
24. In addition to these, the company may from time to time issue communications on these and/ or other business policies which may, from the date of such communication, supersede any business practices or policies previously followed by the company including but not limited to the ones mentioned above.
25. Disputes, if any, will be subject to the jurisdiction of the courts of Kolkata, West Bengal.

I, \_\_\_\_\_ acting on behalf of \_\_\_\_\_ (Name of Distributor\*)  
 (Name of Representative\*)

hereby acknowledge that  
 1. I have read, understood and agreed to all the terms and conditions of business  
 2. All information provided in this form as well as in the enclosed documents, if any, are provided by me and are true to the best of my knowledge and understanding

Krishna Kanta Agarwala  
 (Signature of Representative of Distributor\*)

Krishna Kanta Agarwala  
 (Stamp of Distributor\*)  
 KRISHNA KANTA AGARWALA  
 Mirabazar, P.O. -Plassey  
 Dist-Nadia, 741156, W.B

Date: 29.08.2021  
 Place: PLASSEY.

Name of Company Official	Signature of Company Official

**Part D: Financial Information**

28) Primary Bank Account of Business\*:

Name of the Bank INDIAN BANK  
 Name & address of Branch INDIAN BANK  
MIRA BAKAR PLASSEY NADIA WEST BENGAL  
 IFSC Code of Branch IDIB000OPGGI Type of Account: Savings/Current/OD   
 Account No 50167932816 / No

29) Does the applicant have CC/OD facility from any bank\*? Yes  / No   
 If Yes, Name of Bank \_\_\_\_\_  
 Name & address of Branch \_\_\_\_\_

30) Security Deposit\* of Rs \_\_\_\_\_ paid through  Cheque No. \_\_\_\_\_ / RTGS   
 31) Is the Official Shop used by the Distributor, owned by the Distributor\*? Yes  / No   
 If Yes, approx. size \_\_\_\_\_ Address: \_\_\_\_\_

32) Is the Godown used by the Distributor, owned by the Distributor\*? Yes  / No   
 33) If Yes, approx. size \_\_\_\_\_ Address: \_\_\_\_\_

34) Number of staff employed by the applicant \_\_\_\_\_  
 35) Does the applicant own any 2-wheeler? Yes  / No   
 If Yes, Number of such vehicles \_\_\_\_\_ used for Business  / Personal  / Both

36) Does the applicant own any 4-wheeler? Yes  / No   
 If Yes, Number of such vehicles \_\_\_\_\_ used for Business  / Personal  / Both   
 37) Brief details of property owned by the applicant\*:

Does the applicant own any land parcels? Yes  / No   
 Does the applicant own any house property? Yes  / No

**Part E: List of Documents to be Provided**

Signed, sealed and dated Distributorship Form along with the following mandatory documents	
For Proprietorship	1. Signed copy of ID Proof (Aadhaar Card/ Passport/ Driving License) 2. Signed copy of Address Proof (Aadhaar Card/ Passport) 3. Signed copy of PAN 4. Signed copy of GST Certificate (if applicable) 5. Signed copy of Seed License 6. Statement of primary bank account(s) of business evidencing debit and credit transactions, for the last 3 months
Additional documents for Partnership Firm	7. Signed copy of registered partnership deed 8. Authorization from all partners allowing representative to act and sign on behalf of the firm
Additional documents for Private Limited Company	7. Signed copy of Memorandum and Articles of Association 8. BOD resolution allowing representative to act and sign on behalf of the company

**Customer Care**

No: 8336929400

Email: [customercare\\_uacisandb@universalagri.in](mailto:customercare_uacisandb@universalagri.in)

Approximate

**Part C: Market Intelligence & Sales Plan**

Field Crops are primarily cultivated in this area?

Paddy			
Type	Key Variety	Companies Offering Them	Approx. Volume (In MT)
OP			
OP			
OP			
Improved / HYV			
Improved / HYV			
Improved / HYV			
Hybrid			
Hybrid			
Hybrid			

  

Wheat			
Type	Key Variety	Companies Offering Them	Approx. Volume (In MT)

  

Mustard			
Type	Key Variety	Companies Offering Them	Approx. Volume (In MT)

  

Maize			
Type	Key Variety	Companies Offering Them	Approx. Volume (In MT)

22) What are the important Vegetable crops cultivated in this area?

Crops	Key Variety	Key Brands	Approx. Volume (In MT)

23) Which are main companies operating in this area?

Company Name	Key products	Approx. Turnover	Sales Team Size	Mode of work

24) What is your sales plan for our products in coming years\*?

Name of the Product	Quantity (MT)	
	Year 1	Year 2
Field Crop		
Field Crop		
Field Crop		
Field Crop		
Vegetable		
Vegetable		
Vegetable		

25) What is the area for which you seek our Distributorship (Area of Operation)\*?

.....

26) Name your preferred Transporter / Courier\*

.....

27) Please share if you have any suggestions to improve business

.....

**Part B: Business Background of Applicant**

12) Year of Establishment:

13) Number of years for which you are dealing in Seeds:

14) Are you a Distributor of any other company dealing in Field Crops\*? Yes  / No

15) If yes, please share the following details on your business with these companies:

Company Name	Vintage of Relationship (In years)	Key Products Sold Last Year	Approximate Turnover Last Year

16) Are you a Distributor of any other company dealing in Vegetables\*? Yes  / No

17) If yes, please share the following details on your business with these companies:

Company Name	Vintage of Relationship (In years)	Key Products Sold Last Year	Approximate Turnover Last Year

18) Details of important markets/ regions in your area:

Name of the Market/ Region	Your approx. turnover from the market/ region	No. of your Retailers at the market/ region	Name of key Retailers
			1. 2. 3.
			1. 2. 3.
			1. 2. 3.

19) Are you involved in any other businesses related to agriculture\*? Yes  / No

If yes, please share if you are dealing in

Fertilizers  as Distributor of \_\_\_\_\_

Pesticides  as Distributor of \_\_\_\_\_

Others  (specify) \_\_\_\_\_

20) Are you involved in any other businesses **NOT** related to agriculture\*? Yes  / No

If yes, please share broad overview of the nature of business

