

Approved By: _____ Name of Company Official		Yes
Supporting Documents		
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		
Approved By: _____ Name of Company Official		Signature of Company Official

15. The Distributor paying through cheque must ensure that the cheque is drawn on the bank on which the company will levy a cheque dishonour charge on the Distributor.
16. The company will provide a standard credit period of 60 days from the date of invoice. The Distributor will have to pay the dues within 60 days. The details of which are given in the enclosed documents. The company will provide a standard credit period of 60 days from the date of invoice. The Distributor will have to pay the dues within 60 days. The details of which are given in the enclosed documents. The company will provide a standard credit period of 60 days from the date of invoice. The Distributor will have to pay the dues within 60 days. The details of which are given in the enclosed documents.
17. The company will generally not accept any Sales Return unless the material submitted by the company may levy interest on Overdue payments. However, for select products, the company allows Sales Return policy. The Distributor is required to obtain prior approval from the responsible person of the company for matters relating to Sales Return and obtain prior approval from the responsible person of the company for matters relating to Sales Return and obtain prior approval from the responsible person of the company for matters relating to Sales Return.
18. The Distributor is required not to enter into any financial transactions with any member of the sales team, without specific written instructions in the form of material or funds. All such transactions will be considered as personal and unauthorized 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 instructions 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 considered as infringement of the intellectual property rights of the company. Further, the Distributor may be held liable for the same. The Distributor is required to comply with all requirements of the company. Further, the Distributor may be held liable for the same. The Distributor is required to comply with all requirements of the company. Further, the Distributor may be held liable for the same.
21. The Distributor is required to comply with all requirements of the company. Further, the Distributor may be held liable for the same. The Distributor is required to comply with all requirements of the company. Further, the Distributor may be held liable for the same.
22. The company will share with the Distributor, an Account Statement at the end of every 6 months either by registered email or through any other preferred mode of communication. However, the Distributor can also call the Customer Care Helpline at +91 8336923400 for an updated account statement at any time by sending email at customerscare_india@astamkumarpramania.com.
23. The company will share with the Distributor, a Confirmation of Accounts at the end of each financial year on his registered email or through any other preferred mode of communication. The Distributor is required to call the Customer Care Helpline at +91 8336923400 for an updated account statement at any time by sending email at customerscare_india@astamkumarpramania.com.
24. In addition to these, the company may from time to time issue communications on these and/or other policies which may, from the date of such communication, supersede any business practices or policies 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, ASTAM KUMAR PRAMANICK acting on behalf of ASTAM KUMAR PRAMANIA
 (Name of Representative) (Name of Distributor)

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 the best of my knowledge and understanding

Astam Kumar Pramanick
 (Signature of Representative of Distributor)

ASTAM KUMAR PRAMANIA
 (Stamp of Distributor)

Date:
 Place:

Name of Company Official	<u>ASTAM KUMAR PRAMANIA</u> (Signature of Company Official)

Part D: Financial Information of Applicant

28) Primary Bank Account of Business*:
 Name of the Bank UCO BANK
 Name & address of Branch AMTA
 IFSC Code of Branch UCBA0000819 Type of Account: Sa
 Account No 08190010000533 / No

29) Does the applicant have CC/OD facility from any bank*? Yes / No
 If Yes, Name of Bank _____
 Name & address of Branch _____
 CC/OD Limit (Approx. in Rs lakhs) _____

30) Security Deposit* of Rs. _____ paid through Cheque No. _____

31) Is the Office/ 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 / B

36) Does the applicant own any 4-wheeler? Yes / No
 If Yes, Number of such vehicles _____ used for Business / Personal / B

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	<ol style="list-style-type: none"> Signed copy of ID Proof (Aadhaar Card/ Passport/ Driving License) Signed copy of Address Proof (Aadhaar Card/ Passport) Signed copy of PAN Signed copy of GST Certificate (if applicable) Signed copy of Seed License Statement of primary bank account(s) of business evidencing transactions, for the last 3 months
Additional documents for Partnership Firm	<ol style="list-style-type: none"> Signed copy of registered partnership deed Authorization from all partners allowing representative to act on behalf of the firm
Additional documents for Private Limited Company	<ol style="list-style-type: none"> Signed copy of Memorandum and Articles of Association BOD resolution allowing representative to act and sign on behalf of the company

Mob No: 8336929400

Customer Care

Email: customercare_uacisandb@

Type	Key Variety	Companies Offering Them	Approx. Vol
OP			
OP			
OP			
Improved / HYV			
Improved / HYV			
Improved / HYV			
Hybrid			
Hybrid			
Hybrid			

Wheat			
Type	Key Variety	Companies Offering Them	Approx. Vol

Mustard			
Type	Key Variety	Companies Offering Them	Approx. Vol

Maize			
Type	Key Variety	Companies Offering Them	Approx. Vol

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

Crops	Key Variety	Key Brands	Approx. Vol

23) Which are main companies operating in this area?

Company Name	Key products	Approx. Turnover	Sales Team Size	Mode

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

Name of the Product	Quar
	Year 1
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)**?

KHEJURTALA, GUJARPUR, GAJIPUR, RAMCHONDPUR

26) Name your preferred Transporter / Courier*

MA SHEROWALI TRANSPORT CO. / NODO KE

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: Yes / No
- 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
PAN	10		
MAZI AGRI-TECH	10		

- 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

3) 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.

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) _____

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

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

SI No. _____
(For Office use only)



UACI SEEDS & BIOTECH PRIVATE LIMITED (Formerly Swarna Seeds)

20, Park Side Road, Rajeswari Niwas, 3rd Floor, Kolkata - 700026, West Bengal, India
Contact No. (033) 24649581, E Mail: uaciseedsandbiotech@universalagri.in,
Website: www.universalagri.net

APPLICATION FOR DISTRIBUTORSHIP Part A: Basic Information of Applicant

- 1) Name of the Organization* ASTAM KUMAR PRAMANICK
- 2) Full Postal Address for correspondence*:
Type of Location: Office Shop Godown Residence
Street Name AMTA
P.O. AMTA District HOWRAH
State WEST BENGAL PIN Code 711401
- 3) Nature of the Entity*: Sole Proprietorship Partnership Private Limited Co.
Cooperative/ Society Others (Specify) _____
- 4) Name of Representative*: Proprietor / Managing Partner / Director / Authorised Signatory
ASTAM KUMAR PRAMANICK
- 5) Telephone No:
Office /Shop Landline: (STD Code) _____
Residence Landline: (STD Code) _____
Mobile*: +91 9800851857 WhatsApp Mobile: +91 9836806549
Email ID*: _____
- 6) Preferred mode of communication: Email SMS Whatsapp
- 7) Income Tax Permanent Account No*: AF@PP3819M
- 8) Is the applicant registered under GST*: Yes / No
- 9) If yes, is the applicant registered under Composite Scheme of GST: Yes No
- 10) GST No _____
- 11) Seeds Licence No* 507115
Valid Up to* 28/02/2026 Issued By ULUBERIA

Signature and Photograph of Person Authorized to Represent the Applicant

Affix photograph*



Name* ASTAM KUMAR PRAMANICK

Gender*: Male Female

Relationship with applicant*: Owner Partner Director C

Signature*

Date: 23