



Sl No. (For Office use only)

UACI SEEDS & BIOTECH PRIVATE LIMITED

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

APPLICATION FOR DISTRIBUTORSHIP

Part A: Basic Information of Applicant

1) Name of the Organization* M/S BALAJI AGRO CENTRE

2) Full Postal Address for correspondence*
 Type of Location: Office Shop Godown Residence
 Street Name DALKHOLA-HURNEA ROAD
HURNEA MORE
 PO DALKHOLA District UTTAR DINAJPUR
 State WEST BENGAL PIN Code 733201

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

5) Telephone No:
 Office /Shop Landline: (STD Code) _____
 Residence Landline: (STD Code) _____
 Mobile*: +91 80116688666 WhatsApp Mobile: +91 9434089466
 Email ID*: Jaybalajee28@gmail.com

6) Preferred mode of communication: Email SMS Whatsapp

7) Income Tax Permanent Account No*: AGLP673046

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 19AGLP6730461ZE

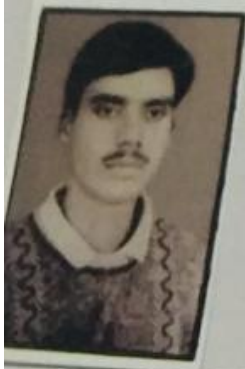
11) Seeds Licence No* S03323
 Valid Up to* 30/10/2021 Issued By ASSTT. DIR. EC, AGRICULTURE

Signature and Photograph of Person Authorized to Represent the Applicant

Name* BIRENDRA GAUR

Gender*: Male Female

Relationship with applicant*: Owner Partner Director Others



Signature*

M/S. BALAJEE AGRO CENTRE
Birendra Gaur

Proprietor

Date: _____

Part B: Business Background of Applicant

- 12) Year of Establishment: 1999
- 13) Number of years for which you are dealing in Seeds: 2008
- 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
PAR SEEDS LTD	2011	PABBY	3000000

- 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
BAISEE	7,00,000.00	3	1. 2. 3.
KARANDIGHI	4,00,000.00	2	1. 2. 3.
TUNGIDIGHI	8,00,000.00	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 _____

Part C: Market Intelligence & Sales Plan

21) Which Field Crops are primarily cultivated in this area?

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

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

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

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

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

M/S. BALAJEE AGRO CENTRE
Balrajee
 3
Proprietor

Part D: Financial Information of Applicant

26) Primary Bank Account of Business? Yes No

Name of the Bank: SANDHAN BANK

Name & address of Branch: DALKHOLA

IFSC Code of Branch: 011101 WTTAR D/HAZRA

Account No: 80810001454 Type of Account: Savings

29) Does the applicant have CDD facility from any bank? Yes / No

If Yes, Name of Bank: _____

Name & address of Branch: _____

CDD Limit (Approx. in Rs lakhs): _____

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

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

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: General Terms

We are our general terms and conditions of company was designed to protect the interest of the Distributor in the area designated. However, for discussion with the responsible of the Distributor. While the Distributor in the Distributor, the Distributor customer care uacisandb@universalagri.in in addition to the TSM team by guiding the Distributor to commence mobile v the Distributor.

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

Whiz No: 8336625400

Customer Care

Email: customer-care_uacisandb@universalagri.in
 MS. BALUJEE AGRI CENTRE

/ 21/12/2019
 Proprietor

15. The Distributor paying through cheque must ensure that the cheque is drawn on the bank on whom the cheque is drawn, otherwise the company will levy a cheque Dishonor charge on the Distributor for such dishonor
16. The company will provide a standard credit period of 60 days from the date of invoice. Cash Discounts for paying dues within 60 days, the details of which are available in the Schemes applicable for the period. Dues remaining unpaid after the expiry of the credit period, the company may levy interest on Overdue payments
17. The company will generally not accept any Sales Return unless the Distributor provides the details of which are available in the yearly Sales Return policy. However, for select products, the company allows Sales Return and obtain prior approval from the Head Office of the company. This policy for matters relating to Sales Return and dispatching material. The company will not provide any credit for material returned.
18. The Distributor is required not to enter into any financial transactions with any member of the company in the form of material or funds. All such transactions will be considered as loans 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 issued by the Head Office of the company
20. The Distributor is required to maintain the integrity of the packaging in which the company at all times and is required not to tamper with the packets, designs, logos and trademarks 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
21. The Distributor is required to comply with all requirements of GST as applicable to the company. Credit Notes and others with respect to its transactions with the company. Further, the Distributor to share with the company, upon request, documents supporting compliance of such requirements
22. The company will share with the Distributor, an Account Statement at the end of every month updated account statement at any time by sending email at **customercare_uacisand@sunflower.in** 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. The Distributor is required to sign and seal on the Confirmation and forward it to the company. However, the Distributor is required to sign and seal on the Confirmation and forward it to the company. The Distributor is required to sign and seal on the Confirmation and forward it to the company. The Distributor is required to sign and seal on the Confirmation and forward it to the company.
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, Biplab Chanda acting on behalf of Birendra Kumar
 (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 true to the best of my knowledge and understanding

 (Signature of Representative of Distributor*)
 Date: _____
 Place: _____

M/S. BALAJEE AGRO CENTRE
Birendra Kumar
 Proprietor
 (Stamp of Distributor*)

_____ Name of Company Official	_____ Signature of Company Official
_____	_____

Company may...
the Price List...
the Overdue...

For Internal Use

Checklist for Sales Team Member Opening Distributorship

Particulars		Yes	No
Distributorship Form			
1	14 Mandatory fields on Page 1 filled up	✓	
2	4 Mandatory fields on Page 2 filled up	✓	
3	3 Mandatory fields on Page 3 filled up		
4	6 Mandatory fields on Page 4 filled up		
5	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	✓	
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:	Signature of Company Official
Name of Company Official	