

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

- Name of the Organization* **BHARAT LAKSHMI NURSERY**
- Full Postal Address for correspondence*:
Type of Location: Office Shop Godown Residence
Street Name **VILL-TEGARIA**
P.O. **TEGARIA** District **PASCHIM MEDINIPUR**
State **WEST BENGAL** PIN Code **721149**
- Nature of the Entity*: Sole Proprietorship Partnership Private Limited Co.
Cooperative/ Society Others (Specify) _____
- Name of Representative*: Proprietor / Managing Partner / Director / Authorised Signatory
ANIMESH SEN
- Telephone No:
Office /Shop Landline: (STD Code) _____
Residence Landline: (STD Code) _____
Mobile*: +91 **9734459696** WhatsApp Mobile: +91 **9739**
Email ID*: **senanimesh12@gmail.com**
- Preferred mode of communication: Email SMS Whatsapp
- Income Tax Permanent Account No*: **BBCE 8BCPS78 ABCPS6876A**
- Is the applicant registered under GST*: Yes / No
- If yes, is the applicant registered under Composite Scheme of GST: Yes No
- GST No **ABCPS6876A3Z3**
- Seeds Licence No* **SO1217**
Valid Up to* **24/08/2021** Issued By _____

Signature and Photograph of Person Authorized to Represent the Applicant



Name* **ANIMESH SEN**

Gender*: Male Female

Relationship with applicant*: Owner Partner Director Others

Signature*
Animesh Sen

Date: **04/10/2021**

Part B: Business Background of Applicant

- 12) Year of Establishment:
- 13) Number of products which you are dealing in Seeds:
- 14) Are you a Distributor of any other company dealing in Field Crops?
- 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
PAN SEEDS PVT LTD	18	
PALLISHREE LTD	3	
NAVIVEEDU SEEDS	8	

- 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
PAN SEEDS PVT LTD	18		15,00,000
JK AGR SEEDS	6		8,00,000

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
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		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 RALLIS INDIA LTD
- 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 & Key Varieties

How are farmers cultivating in this area?

Key Variety	Policy	Company/ Company Operating In
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Part D: Financial Information of Applicant

29) Primary Bank Account of Business*
 Name of the Bank
 Name & address of Branch

PUNJAB NATIONAL BANK
 MAWA (MIDNAPUR) WB-721121

30) Over the applicant have CCOD facility from any bank*? Yes / No

PUNB0321000
 3210000004339

Type of Account: Savings

31) Name of Bank
 Name & address of Branch

CCOD Limit (Approx. in Rs lakhs) paid through Cheque No. / RTGS

32) Is the Official Shop used by the Distributor, owned by the Distributor*? Yes / No
 If Yes, approx. size Address: VILL-TEGARTIA, PO-TEGARTIA

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

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

Mob No: 8336929400

Customer Care

Email: customercare_uacisandb@universalagri.in

Part F: General
 Our general terms and conditions or is required to restrict his operator in the area designated. However, the distributor will appoint a Territory, sub-area. While the TSM will be first point of customer care, the Distributor can at any point in addition to the TSM, the company may appoint the area as it deems fit. The sales team may appoint a team by guiding their sales with existing communication. The Distributor can appoint a team by guiding their sales with existing communication.

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: Name of Company Official	Signature of Company Official