

15. The Distributor paying through cheque must ensure that the cheque issued by him is honored on the date of the cheque. If the bank on whom the cheque is drawn, dishonors the cheque for reasons related to "Insufficient Funds", then the company will levy a cheque Dishonor charge on the Distributor without prejudicing its right to seek legal recourse for such dishonor
16. The company will provide a standard credit period of 60 days from the date of the invoice. The company may offer Cash Discounts for paying dues within 60 days, the details of which are usually provided in the Price List or Schemes applicable for the period. Dues remaining unpaid above 180 days will be considered as Overdue. The company may levy interest on Overdue payments
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 available in the yearly Sales Return policy. 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 customercare_uacisandb@universलगri.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, AMIT KUMAR acting on behalf of ADARSH BEES BHANDAR
 (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

आदर्श बीज भंडार
 अमित कुमार
 प्रोपराईटर

(Signature of Representative of Distributor*)

(Stamp of Distributor*)

Date:

Place:

Name of Company Official	Signature of Company Official

Part D: Financial Information of Applicant

28) Primary Bank Account of Business*:

Name of the Bank INDUS BANK
 Name & address of Branch KHALI PABAD CHOWK
BHAGALPUR
 IFSC Code of Branch IBKL00000721
 Account No 0721651100001083 Type of Account: Savings/Current/OD

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. 25000 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

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

Mob No: 8336929400

Email: customercare_uacisandb@universalagri.in

Part C: Market Intelligence & Sales Plan

21) Which 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*

PAULABABA BUS

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

Part B: Business Background of Applicant

12) Year of Establishment: 2000

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
LAXMI SEEDS			
SEMINES			
SYGENTA			

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
LAXMI SEEDS			
SEMINES			
ADVANTA			

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 UNIVERSAL

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

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* ADARSH BEET BHANDAR
- Full Postal Address for correspondence*:
Type of Location: Office Shop Godown Residence
Street Name STATION ROAD SABJI MANDI
P.O BHAGALPUR District BHAGALPUR
State: BIHAR PIN Code 812001
- Nature of the Entity*: Sole Proprietorship Partnership Private Limited Co.
Cooperative/ Society Others (Specify) _____
- Name of Representative*: Proprietor / Managing Partner / Director / Authorised Signatory
AMIT KUMAR
- Telephone No:
Office /Shop Landline: (STD Code) _____
Residence Landline: (STD Code) _____
Mobile*: +91 7979783001 WhatsApp Mobile: +91 _____
Email ID*: _____
- Preferred mode of communication: Email SMS Whatsapp
- Income Tax Permanent Account No*: BWGPK5128Q
- Is the applicant registered under GST*: Yes / No
- If yes, is the applicant registered under Composite Scheme of GST: Yes No
- GST No 10BWGPK5128Q1ZC
- Seeds Licence No* _____
Valid Up to* ____/____/____ Issued By _____

Signature and Photograph of Person Authorized to Represent the Applicant



Name* AMIT KUMAR

Gender*: Male Female

Relationship with applicant*: Owner Partner Director Others

Signature*

Amit Kumar

Date: 21/11/2021