

15. The Distributor paying through cheque must ensure that the cheque is drawn, dishonors the cheque for then the company will levy a cheque Dishonor charge on the Distributor without prejudicing its right to seek 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 Cash Discounts for paying dues within 60 days, the details of which are usually provided in the Price List 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@universalagri.in](mailto:customercare_uacisandb@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, Ram Lal Mandal acting on behalf of SHRI RAM KRISHI KENDRA  
 (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

मेसर्स श्रीराम कृषि केंद्र  
 राम लाल मंडल  
 प्रापराईटर

\_\_\_\_\_  
 (Signature of Representative of Distributor\*)

\_\_\_\_\_  
 (Stamp of Distributor\*)

te:

ce:

Name of Company Official	Signature of Company Official

Checklist for Sales Team Member Opening Distributorship		Yes	No
<b>Particulars</b>			
<b>Distributorship Form</b>			
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		
<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		
Approved By: Name of Company Official		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 HANDAR VIDYAPITH  
 IFSC Code of Branch UCBA0001276 Type of Account: Savings/Current/OD  
 Account No 12760210000465 / 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) \_\_\_\_\_ / RTGS
- 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	<ol style="list-style-type: none"> <li>Signed copy of ID Proof (Aadhaar Card/ Passport/ Driving License)</li> <li>Signed copy of Address Proof (Aadhaar Card/ Passport)</li> <li>Signed copy of PAN</li> <li>Signed copy of GST Certificate (if applicable)</li> <li>Signed copy of Seed License</li> <li>Statement of primary bank account(s) of business evidencing debit and credit transactions, for the last 3 months</li> </ol>
Additional documents for Partnership Firm	<ol style="list-style-type: none"> <li>Signed copy of registered partnership deed</li> <li>Authorization from all partners allowing representative to act and sign on behalf of the firm</li> </ol>
Additional documents for Private Limited Company	<ol style="list-style-type: none"> <li>Signed copy of Memorandum and Articles of Association</li> <li>BOD resolution allowing representative to act and sign on behalf of the company</li> </ol>

**Customer Care**

**Mob No:** 8336929400

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



Part C: Market Intelligence & Sales Plan

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)\*?  
BOUNSI

26) Name your preferred Transporter / Courier\*  
PAULABARA BUS

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



Sl 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@universallagri.in,  
Website: www.universallagri.net

## APPLICATION FOR DISTRIBUTORSHIP Part A: Basic Information of Applicant

- Name of the Organization\* SHEELI RAM KRISHNI KENDRIKA
- Full Postal Address for correspondence\*:  
Type of Location: Office  Shop  Godown  Residence   
Street Name DUMKIA ROAD BOUNSI  
P.O. BOUNSI District BIANKA  
State BIHAR PIN Code 812104
- Nature of the Entity\*: Sole Proprietorship  Partnership  Private Limited Co.   
Cooperative/ Society  Others  (Specify) \_\_\_\_\_
- Name of Representative\*: Proprietor  / Managing Partner  / Director  / Authorised Signatory   
RAM LAL MANDAL
- Telephone No:  
Office /Shop Landline: (STD Code)      
Residence Landline: (STD Code)      
Mobile\*: +91 9801756419 WhatsApp Mobile: +91        
Email ID\*:
- Preferred mode of communication: Email  SMS  Whatsapp
- Income Tax Permanent Account No\*: CPRPM0238N
- Is the applicant registered under GST\*: Yes  / No
- If yes, is the applicant registered under Composite Scheme of GST:  Yes  No
- GST No
- Seeds Licence No\* 231  
Valid Up to\* 31/03/2022 Issued By

### Signature and Photograph of Person Authorized to Represent the Applicant

Affix photograph\*



Name\* RAM LAL MANDAL

Gender\*: Male  Female

Relationship with applicant\*: Owner  Partner  Director  Others

Signature\*

राम लाल मंडल

Date: