

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@universalagri.in,
Website: www.universalagri.net

APPLICATION FOR DISTRIBUTORSHIP

Part A: Basic Information of Applicant

- Name of the Organization* MS OMSAJI MAA ENTERPRISES
- Full Postal Address for correspondence*:
Type of Location: Office Shop Godown Residence
Street Name BETTIJAH SAHT KABIR ROAD BANUCHHAP
PR
P.O BETTIJAH District BETTIJAH
State BiHar PIN Code 845307
- Nature of the Entity*: Sole Proprietorship Partnership Private Limited Co.
Cooperative/ Society Others (Specify) _____
- Name of Representative*: Proprietor / Managing Partner / Director / Authorised Signatory
SONI KUMARI
- Telephone No:
Office /Shop Landline: (STD Code) _____
Residence Landline: (STD Code) _____
Mobile*: +91 6207780725 WhatsApp Mobile: +91 6203949206
Email ID*: RAJESHKRAJGUP+960@gmail.com
- Preferred mode of communication: Email SMS Whatsapp
- Income Tax Permanent Account No*: 0XDPK8281C
- Is the applicant registered under GST*: Yes No
- If yes, is the applicant registered under Composite Scheme of GST: Yes No
- GST No 100XDPK82814125
- Seeds Licence No*: 0SL20305052164215
Valid Up to* 30/04/2026 Issued By 05052021

Signature and Photograph of Person Authorized to Represent the Applicant



Name* SONI KUMARI

Gender*: Male Female

Relationship with applicant*: Owner Partner Director Others

Oam Jay Maa Enterprises
Soni Kumari
Proprietor

Date: 23/01/2025

Part B: Business Background of Applicant

- 12) Year of Establishment: 2018
- 13) Number of years for which you are dealing in Seeds: 07
- 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
SREERAM Fertilizer	2018	wheat, Paddy.	
MAHAVIR BASRANG.	2018	Pesticide	
J Lakar Chemical	2018	"	
SS Agro (Sargaha)	2019	Paddy	

- 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
Sikta	10 Lakh.		1. 3 2. 3.
Maratar	5 Lakh		1. 2 2. 3.
Manara.	5 Lakh.		1. 3 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			
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)*?

West Champaran.

26) Name your preferred Transporter / Courier*

SIVAM TRANSPORT, DTC Courier.

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

Part D: Financial Information of Applicant

28) Primary Bank Account of Business*:

Name of the Bank ARTIS BANK
 Name & address of Branch BETHIAH
 IFSC Code of Branch UTIB0000630
 Account No 318020473453101 Type of Account: Savings/Current/OD

29) Does the applicant have CC/OD facility from any bank*? Yes / No

If Yes, Name of Bank ARTIS BANK
 Name & address of Branch BETHIAH
 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: BETHIAH

32) Is the Godown used by the Distributor, owned by the Distributor*? Yes / No

33) If Yes, approx. size Address: BETHIAH

34) Number of staff employed by the applicant 02

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

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:	
Name of Company Official	Signature of Company Official