

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

15. The Distributor paying through cheque, if the bank on whom the cheque is drawn, then the company will levy a cheque Dishonor charge on the distributor without recourse for such dishonor.
16. The company will provide a standard credit period of 60 days from the date of the invoice. Schemes applicable for paying dues within 60 days, the details of which are usually available on the company website. Dues remaining unpaid above 180 days will be considered as overdue.
17. The company will generally not accept any Sales Return unless the material supplied by the company may levy interest on Overdue payments. However, for select products, the company allows Sales Return within certain limits and under the details of which are available in the yearly Sales Return policy. The Distributor is required to follow this policy for matters relating to Sales Return and obtain prior approval from the responsible authority for dispatching material. The company will not provide any credit for material returned in violation to its policy.
18. The Distributor is required not to enter into any financial transactions with any member of the sales team in the form of material or funds. All such transactions will be considered as personal and unsanctioned by the company and 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 approval 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 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 Return 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 registered email or through any other preferred mode of communication. However, the Distributor can ask for updated account statement at any time by sending email at customercare_uacisandb@universalagri.in or 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 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 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.

MANISH KUMAR acting on behalf of HEMANT KUMAR PATEL
 (Name of Representative*) (Name of Distributor*)

I 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

Manish Kumar
 (Signature of Representative of Distributor*)

OM KRISHI SEVA KENDRA
Hemant Patel
 (Stamp of Distributor*)
Proprietor

Name of Company Official	Signature of Company Official

Part C: Market Intelligence & Sales Plan

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

Paddy		Companies Offering Them	Approx. Volume (In MT)
Type	Key Variety		
OP	1825		
OP			
OP			
Improved / HYV	Glaxi/USA		
Improved / HYV			
Improved / HYV			
Hybrid	FLC-18		
Hybrid			
Hybrid			
Wheat		Companies Offering Them	Approx. Volume (In MT)
Type	Key Variety		
Mustard		Companies Offering Them	Approx. Volume (In MT)
Type	Key Variety		
Maize		Companies Offering Them	Approx. Volume (In MT)
Type	Key Variety		

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

Part B: Business Background of Applicant

12) Year of Establishment: 2005
 13) Number of years for which you are dealing in Seeds: 05 Yes / No
 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	Approximate Turnover Last Year
Savana Seeds			30 Lacs
UACI (Chemical)		SPD 55	10 Lacs

16) Are you a Distributor of any other company dealing in Vegetables*:
 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
Bansga	40 Lacs		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 _____
 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 D: Financial Information of Applicant

Primary Bank Account of Business*:

Name of the Bank BANK OF BARODA
 Name & address of Branch BABNA
 IFSC Code of Branch BARB0DBBASN
 Account No 8726020000216 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. _____ 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 _____ 2

35) Does the applicant own any 2-wheeler? Yes / No

If Yes, Number of such vehicles _____ 3 used for Business / Personal / Both

36) Does the applicant own any 4-wheeler? Yes / No

If Yes, Number of such vehicles _____ 1 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

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

- 1) Name of the Organization* **OM KRISHI SEVA**
- 2) Full Postal Address for correspondence*:
Type of Location: Office Shop Godown Residence
Street Name **NH 55 BY PASS ROAD**
P.O **BASNA** District _____
State _____ PIN Code **743557**
- 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
HEMANT KUMAR PATEL
- 5) Telephone No:
Office /Shop Landline: (STD Code) _____
Residence Landline: (STD Code) _____
Mobile*: +91 _____ WhatsApp Mobile: +91 _____
Email ID*: _____
- 6) Preferred mode of communication: Email SMS Whatsapp
- 7) Income Tax Permanent Account No*: _____
- 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 **22EFPPPS851E1Z8**
- 11) Seeds Licence No* **374**
Valid Up to* **14/09/2024** Issued By **DDA**

Signature and Photograph of Person Authorized to Represent the Applicant



Name* **HEMANT KUMAR PATEL**

Gender*: Male Female

Relationship with applicant*: Owner Partner Director Others

Signature*

OM KRISHI SEVA KENDRA

Hemant
Proprietor

Date: _____