



BANGIYA GRAMIN VIKASH BANK
A GOVT. ENTERPRISE

Krishnapur Branch:
P.O.: Dohil Via Gazole,
Dist. Malda - 732 138
IFSC CODE: UTBIORRBBGB

KNP/I

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

D D M M Y Y Y Y

PAY Universal Agro chemical Industries

या धारक को OR BEARER

RUPEES रुपये

अदा करें

₹

खा. नं.
A/c. No.

CIC 5311250009336

IFSC CODE :-
JNBORRBBGB

Sunil K. Sarkar
Please sign above

⑈ 13630 ⑈ 7328305291 ⑈

13



BANGIYA GRAMIN VIKASH BANK
A GOVT. ENTERPRISE

Krishnapur Branch:
P.O.: Dohil Via Gazole,
Dist. Malda - 732 138
IFSC CODE: UTBIORRBBGB

KNP/I

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

D D M M Y Y Y Y

PAY Universal Agro chemical Industries

या धारक को OR BEARER

RUPEES रुपये

अदा करें

₹

खा. नं.
A/c. No.

CIC 5311250009336

Sunil K. Sarkar
Please sign above

⑈ 13630 ⑈ 7328305291 ⑈

13



BANGIYA GRAMIN VIKASH BANK
A GOVT. ENTERPRISE

Krishnapur Branch:
P.O.: Dohil Via Gazole,
Dist. Malda - 732 138
IFSC CODE: UTBIORRBBGB

KNP/I

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

D D M M Y Y Y Y

PAY Universal Agro chemical Industries

या धारक को OR BEARER

RUPEES रुपये

अदा करें

₹

खा. नं.
A/c. No.

CIC 5311250009336

IFSC CODE :-
JNBORRBBGB

Sunil K. Sarkar
Please sign above

⑈ 13630 ⑈ 7328305291 ⑈

13



UNIVERSAL AGRO CHEMICAL INDUSTRIES

16 No., India Exchange Place, 3rd Floor, Room No. 6,
Kolkata - 700001, West Bengal, India
Website: www.universalagri.net

APPLICATION FOR DISTRIBUTORSHIP

PART A: Basic Information of Applicant

- Name of the Organization* **M/S-SUNIL KUMAR SARKAR**
- Full Postal Address for correspondence*:
Type of Location: Office Shop Godown Residence
Street Name **NITLL-KRISHNAPIUR**
PI-S-GA20LA
P.O. **DIHTIL** District **MALDA**
State **WEST BENGAL** PIN Code **732138**
- Nature of the Entity*: Sole Proprietorship Partnership Private Limited Co.
Cooperative/ Society Others (Specify) _____
- Name of Representative*: Proprietor / Managing Partner / Director / Authorised Signatory
SUNIL KUMAR SARKAR
- Telephone No:
Office /Shop Landline: (STD Code) _____
Residence Landline: (STD Code) _____
Mobile*: +91 **9733483132** WhatsApp Mobile: +91 **7866074636**
Email ID*: **SarkarSunil11973@gmail.com**
- Preferred mode of communication: Email Ph. Whatsapp
- Income Tax Permanent Account No*: **DLPPS4395B**
- Is the applicant registered under GST*: Yes / No
- If yes, is the applicant registered under Composite Scheme of GST: Yes / No
- GST No **19DLPPS4395B2ZG**
- Pesticide Licence No* **P02722** Valid Up to* **LI / FE / TIME**
Issued By **15032019**
- Micronutrient Licence No* **F23764** Valid Up to* **31 / 03 / 2027**
Issued By **01042019**

Signature and Photograph of Person Authorized to Represent the Applicant



Name* **SUNIL KUMAR SARKAR**

Gender*: Male Female

Relationship with applicant*: Owner Partner Director Others

Sunil K. Sarkar
Signature*

Date: **05 05 2022**

PART B: BUSINESS BACKGROUND OF APPLICANT

- 13) Year of Establishment: 2019
 14) Number of years for which you are dealing in Pesticides / Micro nutrients: 2019
 15) Are you a Distributor of any other company dealing in Pesticides*: Yes / No
 16) 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 |
|--------------|------------------------------------|-----------------------------|--------------------------------|
| | | | |
| | | | |
| | | | |

- 17) Are you a Distributor of any other company dealing in Micronutrients*: Yes / No
 18) 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 |
|--------------|------------------------------------|-----------------------------|--------------------------------|
| | | | |
| | | | |
| | | | |

- 19) 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 |
|----------------------------|---|---|---------------------------------------|
| Dohel | 3 Lac | 2 | 1. Arabinda Sarkar 2. Deben Sarkar |
| Ahla - | 3 Lac | 2 | 1. Manos Sarkar 2. Mantu Sarkar |
| | | 1. 2. 3. | |

- 20) 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
 Seeds as Distributor of
 Others (specify)

- 21) 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

22) For which area do you seek our Distributorship (Area of Operation)?

Kaishnapur, Babil, Gazole, Malda.

23) What are the main Crops that are cultivated in this area?

| Type | Crop | Approx. Area | Approx. Volume |
|-------------|---------------|--------------|----------------|
| Field Crops | <u>Paddy</u> | <u>2</u> | <u>5 Lac</u> |
| Field Crops | | | |
| Field Crops | | | |
| Vegetables | <u>Potato</u> | <u>1</u> | <u>1 Lac</u> |
| Vegetables | | | |
| Vegetables | | | |
| Others | | | |
| Others | | | |

24) Which are the key Herbicides sold in this area?

| Molecules | Crops | Key Brands | Approx. Volume |
|-----------------|------------|---------------|----------------|
| <u>Paraquat</u> | <u>All</u> | <u>Binays</u> | <u>3 Lac</u> |
| | | | |

25) Which are the key Fungicides sold in this area?

| Molecules | Crops | Key Brands | Approx. Volume |
|---------------------|---------------|----------------|----------------|
| <u>Mencozeb 75?</u> | <u>Potato</u> | <u>Dhanuka</u> | <u>5 Lac</u> |
| | | | |

26) Which are the key Pesticides sold in this area?

| Molecules | Crops | Key Brands | Approx. Volume |
|----------------------------------|------------|--------------|----------------|
| <u>Chlorpyrifos chlorpyrifos</u> | <u>All</u> | <u>Hamda</u> | <u>2 Lac</u> |
| | | | |

27) Which are the key Micronutrients/ Crop supplements sold in this area?

| Products | Crops | Key Brands | Approx. Volume |
|-------------------------|---------------------|-------------------------|----------------|
| <u>High zinc plus -</u> | <u>Paddy/Potato</u> | <u>High zinc plus -</u> | <u>3 Lac</u> |
| | | | |

28) What is your sales plan for our products in the near future?

| Name of the Product | Quantity | |
|---------------------|----------------|----------------|
| | Year 1 | Year 2 |
| Herbicides | | |
| Herbicides | <u>2 Lac</u> | <u>2.5 Lac</u> |
| Fungicides | <u>2 Lac</u> | <u>2.5 Lac</u> |
| Fungicides | <u>1 Lac</u> | <u>2 Lac</u> |
| Pesticides | <u>1 Lac</u> | <u>2 Lac</u> |
| Pesticides | <u>1 Lac</u> | <u>1.5 Lac</u> |
| Micronutrients | <u>0.5 Lac</u> | <u>1 Lac</u> |
| Micronutrients | <u>2 Lac</u> | <u>2.5 Lac</u> |
| Micronutrients | <u>1 Lac</u> | <u>2 Lac</u> |

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

PART D: FINANCIAL INFORMATION OF APPLICANT

30) Primary Bank Account of Business*:

Name of the Bank: **BIANGINIA GRAMIN VIKASH BANK**
 Name & address of Branch: **KRISHNAPUR PO-DOWIL VIA-GA20LE**
DUST-MALDA PIN-7132138
 IFSC Code of Branch: **PUNBOKR088A**
 Account No: **5311125004336** Type of Account: Savings/Current/OD

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

Name of Bank: **BIANGINIA GRAMIN VIKASH BANK**
 Name & address of Branch: **KRISHNAPUR PO-DOWIL VIA-GA20LE**
DUST-MALDA PIN-7132138
 CCOD Limit (Approx. in Rs lakhs): **300000**

32) Security Deposit* of Rs. **100000** paid through Cheque No. / RTGS

33) Is the Office/ Shop used by the Distributor, owned by the Distributor? Yes / No
 If Yes, approx. size **10614** Address: **KRISHNAPUR**

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

35) If Yes, approx. size **20135** Address: **KRISHNAPUR**

36) Number of staff employed by the applicant: **NO**

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

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

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

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

39) 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 | <input checked="" type="checkbox"/> Signed copy of ID Proof (Aadhaar Card/ Passport/ Driving License) |
| | <input checked="" type="checkbox"/> Signed copy of Address Proof (Aadhaar Card/ Passport) |
| | <input checked="" type="checkbox"/> Signed copy of PAN |
| | <input checked="" type="checkbox"/> Signed copy of GST Certificate (if applicable) |
| | <input checked="" type="checkbox"/> Signed copy of Pesticide License |
| Additional documents for Partnership Firm | <input checked="" type="checkbox"/> Signed copy of Micronutrient License |
| | <input checked="" type="checkbox"/> Statement of primary bank account(s) of business evidencing debit and credit transactions for the last 3 months |
| | <input checked="" type="checkbox"/> Signed copy of registered partnership deed |
| Additional documents for Private Limited Company | <input checked="" type="checkbox"/> Authorization from all partners allowing representative to act and sign on behalf of the firm |
| | <input checked="" type="checkbox"/> Signed copy of Memorandum and Articles of Association |
| | <input checked="" type="checkbox"/> BOD resolution allowing representative to act and sign on behalf of the company |

Customer Care

Email ID: uaci.ngp2@gmail.com / customer.care@universaagri.in

Mobile No: +91 7410040857 / 8336929010

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 90 days from the date of the invoice. The company may offer Cash Discounts for paying dues within 90 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 not accept any Sales Return unless the material supplied were damaged in transit. For returning such damaged materials, the company follows a 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 SO 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 customer.care@universalagri.in or by calling the Customer Care Helpline at +91 8336929010.
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, Sunil Kumar Sarkar acting on behalf of M/S Sunil Kumar Sarkar
 (Name of Representative*) (Name of Distributor*)

hereby acknowledge that

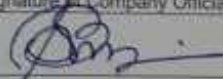
1. I have read, understood and agreed to all the terms and conditions of business
2. All information provided in this form as well as in the enclosed documents, if any, are provided by me and are true to the best of my knowledge and understanding

Sunil kr. Sarkar
 (Signature of Representative of Distributor*)

Sunil kr. Sarkar
 (Stamp of Distributor*)

Date: 05/05/2022

Place: Krishnapur

| Name of Company Official | Signature of Company Official |
|--------------------------|---|
| <u>Sartham Biswas</u> |  |

For Internal Use

Checked by Sales Team Member Opening Distributorship

| Particulars | Yes | No |
|--|-------------------------------------|----|
| Distributorship Form | | |
| 1. 4 Mandatory forms on Page 1 filled up | <input checked="" type="checkbox"/> | |
| 2. 4 Mandatory forms on Page 2 filled up | <input checked="" type="checkbox"/> | |
| 3. 2 Mandatory forms on Page 3 filled up | <input checked="" type="checkbox"/> | |
| 4. 6 Mandatory forms on Page 4 filled up | <input checked="" type="checkbox"/> | |
| 5. 4 Mandatory forms on Page 5 filled up | <input checked="" type="checkbox"/> | |
| Signature of representative added on Page 1 | <input checked="" type="checkbox"/> | |
| Photograph of representative affixed on Page 1 | <input checked="" type="checkbox"/> | |
| Signature of representative added on Page 5 | <input checked="" type="checkbox"/> | |
| Supporting Documents | | |
| a) Proof (Aadhar Card/Passport/Driving License) | | |
| Name on ID proof filled with PAN | <input checked="" type="checkbox"/> | |
| Signed and stamped | <input checked="" type="checkbox"/> | |
| Signed copy of Address Proof (Aadhar Card/Passport) | | |
| Name on address proof filled with ID Proof | <input checked="" type="checkbox"/> | |
| Address on address proof filled with PAN / License | <input checked="" type="checkbox"/> | |
| Signed and stamped | <input checked="" type="checkbox"/> | |
| Signed copy of PAN | | |
| Name on PAN filled with ID proof | <input checked="" type="checkbox"/> | |
| Signed and stamped | <input checked="" type="checkbox"/> | |
| Signed copy of COC Certificate (if applicable) | | |
| Name on Certificate filled with ID Proof | <input checked="" type="checkbox"/> | |
| Signed and stamped | <input checked="" type="checkbox"/> | |
| Signed copy of Medicine License | | |
| Name on license filled with ID Proof | <input checked="" type="checkbox"/> | |
| License is valid on the date of form | <input checked="" type="checkbox"/> | |
| If not, proof of application for renewal has been collected | <input checked="" type="checkbox"/> | |
| Signed and stamped | <input checked="" type="checkbox"/> | |
| Signed copy of Medicine License | | |
| Name on license filled with ID Proof | <input checked="" type="checkbox"/> | |
| License is valid on the date of form | <input checked="" type="checkbox"/> | |
| If not, proof of application for renewal has been collected | <input checked="" type="checkbox"/> | |
| Signed and stamped | <input checked="" type="checkbox"/> | |
| Statement of primary bank account(s) of business | | |
| Name on account filled with ID Proof | <input checked="" type="checkbox"/> | |
| Period is for last 3 months | <input checked="" type="checkbox"/> | |
| Primary bank account of business with significant transactions | <input checked="" type="checkbox"/> | |
| Signed and stamped | <input checked="" type="checkbox"/> | |
| Bank Cheques | | |
| 3 cheques | <input checked="" type="checkbox"/> | |
| Not of any cooperative banks | <input checked="" type="checkbox"/> | |
| Contains valid signature of representative and stamp | <input checked="" type="checkbox"/> | |
| Contains no date | <input checked="" type="checkbox"/> | |
| Is not crossed | <input checked="" type="checkbox"/> | |
| Security Deposit has been collected | <input checked="" type="checkbox"/> | |
| Existing Distributor of IACI Seeds & Biotech/ Swarna Seeds | <input checked="" type="checkbox"/> | |
| Effect on Existing Network | | |
| Name of the nearest distributors (can be more than 1): | <input checked="" type="checkbox"/> | |
| Distance from the nearest distributors: | <input checked="" type="checkbox"/> | |

Proposed Business Volume for this FY (in Rs Lakhs)

Credit Limit Required (in Rs Lakhs)

10,00,000 (Ten Lakhs)
3 LAC

Approved By: (all forms have to be approved by respective IACI)

Name of Company Officer

Signature of Company Officer

PART F: GENERAL TERMS & CONDITIONS OF BUSINESS

Listed below are our general terms and conditions of conducting business

1. The company will designate an Area of Operation for the Distributor at the time of initiating the distributorship. The Distributor is required to restrict his operations to his designated Area of Operation only and should not venture beyond the area designated. However, subsequently, the Distributor can alter his Area of Operation but only after prior discussion with the responsible company official
2. The company will appoint a Sales Officer (SO) to serve the Area of Operation designated to the Distributor. While the SO will be first point of contact for the Distributor and should be able to resolve all queries of the Distributor, the Distributor can at any point contact the senior sales officials of the company responsible for this area. Further, for any queries the Distributor can contact the Head Office of the company by sending email at customer.care@universallagri.in or by calling the Customer Care Helpline at +91 8336929010
3. In addition to the SO, the company may appoint one or more permanent/temporary sales team members to serve the area as it deems fit. The sales team members will primarily focus on conducting sales promotional activities in the area and engaging with existing or potential customers. The Distributor will be required to support the local sales team by guiding their sales promotional activities
4. The Distributor can place his orders with the respective SO either verbally or in writing or through any documented communication: A confirmation of the material ordered by the Distributor will be shared with him on his registered mobile via SMS/ Whatsapp at the time the order is entered into the company's CRM solution. In case of any issues, the Distributor is required to contact the SO urgently after receiving the intimation
5. The company will deliver material only against confirmed orders placed by the Distributor with the SO. In case the Distributor ever receives any material not ordered by him, either in terms of quantity, packing sizes, or products, the Distributor is required to inform the company about the discrepancy, within 48 hours of receiving the material by sending email at customer.care@universallagri.in in the absence of any such emails or other documented communications, it will be assumed that the material received was as per orders placed
6. The company may deliver material at the location specified by the Distributor through 3rd party transporters either in full or part load. At the point of receiving the material from the transporter, the Distributor will be required to physically inspect the material and check the quantity, weight and condition of material supplied
7. The company will only dispatch material which are in saleable & good condition. So, if any damaged material is ever received by the Distributor, it is likely that the goods got damaged in transit. In such a situation, the Distributor should not accept the material and should urgently inform the respective SO of the company about the damage. If the Distributor accepts the material from the transporter, it should be only under express instruction of the respective SO. Further, the Distributor is required to send email at customer.care@universallagri.in on this incident within 48 hours of receiving the material. In the absence of any such emails or other documented communications, it will be assumed that the material received was not damaged in anyway
8. The Distributor may be required to pay to the transporter the freight charges at the point of accepting delivery only after inspection of material. The Distributor may be reimbursed for the freight paid either in part of full either by way of deduction from the bill or through a Credit Note
9. If the Distributor reports to have received any material not ordered by him or any material damaged in transit, and the same is verified by the responsible company official, the company may take back the material in question and may make the appropriate adjustments in its books of accounts
10. The company will send a hardcopy of the invoice along with the material. On receipt of the invoice, Distributor is required to reconcile the quantity, packing size and product mentioned on the invoice with the material received. In case of any discrepancy, the Distributor is required to inform the company about the issue within 48 hours of receiving the material by sending email at customer.care@universallagri.in in the absence of any such emails or other documented communications, it will be assumed that the material received is as per invoice
11. The company will issue an official Price List of its products covering the area of operation of the Distributor at the beginning of each season. However, the company may revise the Price List from time to time. The Distributor is required to obtain a copy of this Price List or revisions made thereafter either from the respective SO or by sending an email at customer.care@universallagri.in. The company will invoice its products only at the prices mentioned on the Price List. The Distributor should not expect any prices other than those mentioned on the Price List unless there is a documented communication of the same issued by the Head Office of the company
12. The company may from time to time, issue benefit schemes covering the Distributor's area of operation. These benefits are typically linked to prompt payments and bulk sale volumes. The Distributor is required to obtain copies of these schemes from the respective SO or by sending email at customer.care@universallagri.in. The company will provide these benefits only by following the specific terms and conditions mentioned in the scheme. The Distributor should not expect any benefits other than those mentioned on the scheme unless there is a documented communication of the same issued by the Head Office of the company
13. The company will only sanction the prices and benefits/ schemes mentioned on documented official communications issued by the Head Office of the company. The company will be under no obligation to accept any claims by the Distributor on prices or benefits/ schemes not mentioned on any official communications issued by the Head Office of the company for the Distributor's area of operation. If the local sales representatives commit any special prices or benefits/ schemes, the Distributor is required to obtain an official communication of the same issued by the Head Office of the company before acting on the basis of such commitments
14. The company will accept payment only through Fund Transfers (RTGS/ NEFT/ IMPS) or crossed cheques drawn on any banks other than cooperative banks. The company will not accept any payments in cash. However, if in any special circumstances, the company agrees to accept payment in cash, the Distributor is required to obtain a Money Receipt of the company for such payments from the company official accepting this payment



Government of India
Form GST REG-06
[See Rule 10(1)]

Registration Certificate

Registration Number : 19DLPPS4395B2ZG

| | | | | | |
|--|--|---|------------|---|----|
| 1. | Legal Name | SUNIL KUMAR SARKAR | | | |
| 2. | Trade Name, if any | SUNIL KUMAR SARKAR | | | |
| 3. | Constitution of Business | Proprietorship | | | |
| 4. | Address of Principal Place of Business | KRISHNAPUR, DOHIL, KRISHNAPUR, Malda, West Bengal, 732138 | | | |
| 5. | Date of Liability | | | | |
| 6. | Period of Validity | From | 10/08/2017 | To | NA |
| 7. | Type of Registration | Regular | |  | |
| 8. | Particulars of Approving Authority | | | | |
| Signature | | | | | |
| Signature Not Verified Digitally signed by DS GOODS AND SERVICES TAX NETWORK 1 Date: 2018.07.07-13:03:35 IST | | | | | |
| Name | | | | | |
| Designation | | | | | |
| Jurisdictional Office | | | | | |
| 9. | Date of issue of Certificate | 07/07/2018 | | | |
| Note: The registration certificate is required to be prominently displayed at all places of business in the State. | | | | | |

This is a system generated digitally signed Registration Certificate issued based on the deemed approval of application on 10/08/2017 .

कर विभाग
INCOME TAX DEPARTMENT
SUNIL KUMAR SARKAR
NARENDRA NATH SARKAR
14/09/1973



भारत सरकार
GOVT. OF INDIA

Permanent Account Number
DLPPS4395B

Sunil Kumar Sarkar
Signature



In case this card is lost / found, kindly inform / return to :
Income Tax PAN Services Unit, UTTISI
Plot No. 3, Sector 11, CBD Belapur,
Navi Mumbai - 400 614.

इस कार्ड के खोने/पाने पर कृपया सूचित करें/वापस करें :
आपका पैन सेवा यूनिट, ए.टी.आई.एस.यू.
प्लॉट नं. 3, सेक्टर 11, सी.बी.डी. बेलपुर,
नवी मुंबई-400 614.

Sunil kr. Sarkar



FORM III
Govt. of West Bengal
Dept of Agriculture
office of the **DDA (Admin) Malda**

LICENCE TO SELL, STOCK OR EXHIBIT FOR SALE OR DISTRIBUTE INSECTICIDES
[See sub-rules (4) of rule 10]

1. License Number **P02722** Digitized License for **MLD/0428/P(AC)/2019**
License to **Sell,stock/exhibit for sale/distribution of insecticides** for District : **Malda** in the
premises situated at **Annexure - A**

is granted to -

M/s M/S SUNIL KUMAR SARKAR

Shop Address :

**JI no : 268 , Dag no : 185,243 , Khatian no : 845 , Road : BAMONGOLA ROAD , Mouza :
Krishnapur , Block : GAJOL , Subdivision : Malda Sadar , District : Malda , State : West
Bengal**

Email : **sarkarsunil1973@gmail.com**

Mobile no : **9733483132**

as specified here under:— **Annexure - B**

2. The insecticide(s) shall be **Sell,stock/exhibit for sale/distribution of insecticides** under
the direction and supervision of the following expert staff:

(a) For **Sell,stock/exhibit for sale/distribution of insecticides** :

()

3. The licence is subject to such conditions as may be specified in the rules for the time being
in force under the Insecticides

Act, 1968 as well as the conditions on the certificate of registration and others as stated
below.

Place: _____ Dated : _____

(Signature of the licensing officer)

Deputy Director of Agriculture
(Administration)
Malda.



অনন্যমুখ্য বিশিষ্ট পরিচয় প্রমাণকরণ

অনন্যমুখ্য সরকার

Unique Identification Authority of India
Government of India

অনন্যমুখ্য আই ডি / Enrollment No.: 21894697/058961

To
শ্রীমতী সুনীল সারকার
Smt Sunil Sarkar
11/01/2011
Kanchanjur Dohar
Gazole Maidia
Kanchanjur
Dohar



আনন্যমুখ্য আইডি নং / Your Aadhaar No. :

6812 6739 4704

আনন্যমুখ্য আইডি নং, আনন্যমুখ্য পরিচয়



অনন্যমুখ্য সরকার
Government of India



শ্রীমতী সুনীল সারকার
Sunit Kumar Sarkar
পিতা : সুনীল সারকার
Father : Sunil Sarkar
জন্ম তারিখ / DOB : 14/09/1973
সঙ্গ / Male



6812 6739 4704

আনন্যমুখ্য আইডি নং, আনন্যমুখ্য পরিচয়



তথ্য

- আনন্যমুখ্য পরিচয়ের প্রমাণ, নাগরিকত্বের প্রমাণ নয়।
- পরিচয়ের প্রমাণ অনলাইন প্রমাণীকরণ দ্বারা লভ করা হয়।

INFORMATION

- Aadhaar is proof of identity, not of citizenship.
- To establish identity, authenticate online.

■ আনন্যমুখ্য সারা দেশে মান্য।

■ আনন্যমুখ্য ভবিষ্যতে সরকারী ও বেসরকারী পরিষেবা প্রাপ্তির সহায়ক হবে।

■ Aadhaar is valid throughout the country.

■ Aadhaar will be helpful in availing Government and Non-Government services in future.



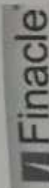
অনন্যমুখ্য সরকার - প্রমাণকরণ
Unique Identification Authority of India

ঠিকানা:
S/O Narendra Nath Sarkar,
কান্জুর, দোহার, গাজোল, মাদিয়া,
কান্জুর, দোহার, গাজোল, মাদিয়া,
পশ্চিম বঙ্গ, 732138
Address:
S/O Narendra Nath Sarkar,
Kanchanjur, Dohar, Gazole, Maidia,
Kanchanjur, Dohar, Gazole, Maidia,
West Bengal, 732138

6812 6739 4704

1917 info@uidai.gov.in www.uidai.gov.in

Sunita K. Sarkar



11
 Universal Banking Solution from Infosys April, 2022
 User 1507655 | 5311 | Menu Shortcut: Go

Transaction Inquiry

| | | | |
|-----------------------------|-----------------------------|--------------------------|------------|
| A/c. ID | 5311250004336 | CCY/SOL ID | INR/5311 |
| A/c. Name | SUNIL KUMAR SARKAR | Balance | 8,30,281.2 |
| General Ledger Subhead Code | 61100 | Closing Balance | 3,00,794.7 |
| Opening Balance | 2,95,388.22 Cr | Funds in Clearing | 0.00 Cr |
| Floating Balance | 0.00 Cr | Effective Available Amt. | 11,30,281. |
| Available Amt. | 11,30,281.24 Cr | A/c. Opening Date | 24-07-201 |
| Customer Status | OTH | A/c. Status Date | 24-07-201 |
| A/c. Status | A Active | | |
| Purge Date | 23-07-2013 | | |
| Address | VILL KRISHNAPUR PO DOHIL | State | WB WEST |
| City | MLD MALDA | Postal Code | 732138 |
| Country | IN INDIA | Telex No. | |
| Phone Type | COMMPH1 | | |
| Phone No. | +919733483132 | | |
| Email ID Type | | | |
| Email ID | | | |

| General Ledger Date | Value Date | Instrument No. | Withdrawal Amt. | Deposit Amt. | Balance | Narrative |
|---------------------|------------|----------------|-----------------|----------------|----------------|------------------------------------|
| 31-03-2022 | 31-03-2022 | | 2,239.00 Dr | | 3,00,794.76 Dr | 5311250004336 Int. Coll. 01-03-20; |
| 30-03-2022 | 30-03-2022 | | 1,110.00 Dr | | 2,89,555.76 Dr | CC RENEWAL CHARGE |
| 30-03-2022 | 30-03-2022 | 413298 | 3,37,200.00 Dr | | 2,97,445.76 Dr | RTGS TO: WEST BENGAL STATE |
| 30-03-2022 | 30-03-2022 | | | 24.00 Dr | 39,754.24 Cr | Charges for RTGS: PUNBR52022I |
| 30-03-2022 | 30-03-2022 | 413289 | 2,50,000.00 Dr | | 39,778.24 Cr | TRANSFER TO: GOLOK CH MAND |
| 30-03-2022 | 30-03-2022 | | | 4,87,200.00 Cr | 2,89,778.24 Cr | BY CASH |
| 28-03-2022 | 28-03-2022 | | | 10,890.00 Cr | 1,97,421.76 Dr | NEFTIn/HSBCN22087880562/PER |
| 27-03-2022 | 27-03-2022 | | 360.00 Dr | | 2,08,311.76 Dr | Supervision/Inspection Charges |
| 25-03-2022 | 25-03-2022 | 413287 | 93,200.00 Dr | | 2,07,951.76 Dr | NEFT TO: WEST BENGAL STATE |



FORM III
Govt. of West Bengal
Dept of Agriculture
office of the **DDA (Admin) Malda**

LICENCE TO SELL, STOCK OR EXHIBIT FOR SALE OR DISTRIBUTE INSECTICIDES
[See sub-rules (4) of rule 10]

1. License Number **P02722**
Date of Issue: 19/03/2019

Valid Upto: Until Suspended /withheld
/Cancelled


Amendment fees received Rs. 150 through Online payment bearing GRN No.
192020210215693258 Dated 04/07/2021

Concern Name
M/S SUNIL KUMAR SARKAR

Principal Certificate

| Sl no. | Amendment Type | Particulars of the Insecticide | Name of manufacturer | Number of Certificate of Registration | Date of grant of licence | Validity of Licence, wherever applicable |
|--------|----------------|--------------------------------|-------------------------------|---|--------------------------|--|
| 1 | Added | ALL Insecticide | LILA AGROTECH PRIVATE LIMITED | As per Certificate of Registration issued by CIB&RC | 19/03/2019 | Until Suspended /withheld /Cancelled |
| 2 | Added | ALL Insecticide | HINDUSTAN AGRO PRODUCTS | As per Certificate of Registration issued by CIB&RC | 19/03/2019 | Until Suspended /withheld /Cancelled |

Place: Malda Dated: 07.07.2021


(Signature of Notified Authority)
Deputy Director of Agriculture
(Administration)
Malda.