



भारतीय स्टेट बैंक
State Bank Of India

(07004) - DHARMAPUKURIA
PO & VILL : DHARMAPUKURIA P.S BONGAON,
DT:24 PARGANAS (N), W. BENGAL 743235
Tel: 33-1235478885 IFS Code : SBIN007004

वैधता की तिथि के लिए केवल / VALID FOR MONTHS ONLY

DDMMYYYY

PAY Universal Agro Chemical Industries या धारक को OR BEARER

रुपये RUPEES

अदा करें ₹

खा. सं.
A/c No. 37937183735

VALID UPTO ₹ 10 LACS AT NON-HOME BRANCH FOR NON-CASH TRANSACTION ONLY

53738173973

SB ACCOUNT

PREFIX:
0523700237

Prosenjit Pal

Prosenjit Pal
Please sign above

MULTI-CITY CHEQUE Payable at Par at All Branches of SBI

⑈ 58 588 1 ⑈ 70000 255 1 ⑈ 005698 ⑈ 3 1



भारतीय स्टेट बैंक
State Bank Of India

(07004) - DHARMAPUKURIA
PO & VILL : DHARMAPUKURIA P.S BONGAON,
DT:24 PARGANAS (N), W. BENGAL 743235
Tel: 33-1235478885 IFS Code : SBIN007004

वैधता की तिथि के लिए केवल / VALID FOR MONTHS ONLY

DDMMYYYY

PAY Universal Agro Chemical Industries या धारक को OR BEARER

रुपये RUPEES

अदा करें ₹

खा. सं.
A/c No. 37937183735

VALID UPTO ₹ 10 LACS AT NON-HOME BRANCH FOR NON-CASH TRANSACTION ONLY

53738173973

SB ACCOUNT

PREFIX:
0523700237

Prosenjit Pal

Prosenjit Pal
Please sign above

MULTI-CITY CHEQUE Payable at Par at All Branches of SBI

⑈ 58 588 3 ⑈ 70000 255 1 ⑈ 005698 ⑈ 3 1



भारतीय स्टेट बैंक
State Bank Of India

(07004) - DHARMAPUKURIA
PO & VILL : DHARMAPUKURIA P.S BONGAON,
DT:24 PARGANAS (N), W. BENGAL 743235
Tel: 33-1235478885 IFS Code : SBIN007004

वैधता की तिथि के लिए केवल / VALID FOR MONTHS ONLY

DDMMYYYY

PAY Universal Agro Chemical Industries या धारक को OR BEARER

रुपये RUPEES

अदा करें ₹

खा. सं.
A/c No. 37937183735

VALID UPTO ₹ 10 LACS AT NON-HOME BRANCH FOR NON-CASH TRANSACTION ONLY

53738173973

SB ACCOUNT

PREFIX:
0523700237

Prosenjit Pal

Prosenjit Pal
Please sign above

MULTI-CITY CHEQUE Payable at Par at All Branches of SBI

⑈ 58 588 2 ⑈ 70000 255 1 ⑈ 005698 ⑈ 3 1

Generally used abbreviations

a/c = Account	dep = Deposit	Pr = Principal
adj = Adjustment	Dft = Draft	proc = Processing Change
Amt = Amount	dish/dsh = Dishonour	rd = Recurring Deposit
Ar = Arrear	DR = Debit	= Return
bal = Balance	DoB = Date of Birth	Round of
Capn = Capitalization	eft = Electronic Fund	aving Bank
chg/ch = Charge	Inop = Inoperative	Short Credit
chq = Cheque	ins = Insurance	SORD = Standing Instruction
Clos = Closure	int/in = Interest	V/H/o = Son/Daughter/Wife/Husband of
coll = Collection	lon/in = Loan	er = Transfer
comm = Commision	min = Minimum	Telegraphic Transfer
COR/CORR = Correction	os = Outstanding	txn = Transaction
CR = Credit	P & T = Postage & Telegram	Wdl = Withdrawal
csh = Cash	Pos = Point of sale	+ MOD bal = total balance (SB+linked MOD a/c)



भारतीय स्टेट बैंक

State Bank of India

DIGITAL SAVING BANK -IND-IMR
 CIF No : 90177186968
 Account No : 37937483735
 Customer Name: Mr. Prosenjit Pal

DHARMAPUKURIA
 PO & VILL : DHARMAPUKURIA

S/D/W/H/o: BISWAJIT
 Address: S/O: Biswajit Pal

Phone: 255070
 Email: sbi.07004@sbi.co.in

Ghatbaor

Branch Code: 7004

Phone:
 Email: prosenjit@gmail.com

Date of Issue: 11/09/2018

D.O.B. (If Minor):

11/09/2018 6566456 7004

NOP.: SINGLE

IFSC: SBIN0007004

Mem. Reg. No.: 0000000239136317

MICR: 700002 शाखा प्रबंधक

FIRST Branch Manager





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

Registration Certificate

Registration Number : 19EJPPP9631C1ZO

1.	Legal Name	PROSENJIT PAL			
2.	Trade Name, if any	PAL KARISHA VANDAR			
3.	Constitution of Business	Proprietorship			
4.	Address of Principal Place of Business	0, 0, BISWAJIT PAL, GHATBAOR, NORTH 24 PARGANAS, GHATBAOR, NORTH 24 PARGANAS, North 24 Parganas, West Bengal, 743235			
5.	Date of Liability				
6.	Period of Validity	From	01/02/2022	To	Not Applicable
7.	Type of Registration	Regular			
8.	Particulars of Approving Authority	Centre			
Signature		Signature Not Verified Digitally signed by DS GOODS AND SERVICES TAX NETWORK(4) Date: 2022.02.01 18:01:02 IST			
Name		Urmi Ghosh			
Designation		Superintendent			
Jurisdictional Office		BARASAT			
9. Date of issue of Certificate		01/02/2022			
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 approval of application granted on 01/02/2022 by the jurisdictional authority.

প্রোঃ- প্রসেনজিৎ পাল
ঘাটবাঁওড়, উত্তর ২৪ পরগণা,
পিন-৭৪৩২৩৫

Prosengit Pal.

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT. OF INDIA

स्थायी संख्या संख्या कार्ड
Permanent Account Number Card

EJPPP9631C

नाम / Name
PROSENJIT PAL

पिता का नाम / Father's Name
DISWAJIT PAL

जन्म की तारीख / Date of Birth
08/07/1998

Prosengit Pal
हस्ताक्षर / Signature



थोः- प्रसेनजित पाल
घाटिवाँड, उत्तर २८ परगना,
पिन-१८०२०५

Prosengit Pal

PART C: MARKET INTELLIGENCE & SALES PLAN

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

Rajal Buzia. (Farmers level sell)

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

Type	Crop	Approx. Area	Approx. Volume
Field Crops	Banjaj		
Field Crops	fruit, paddy		
Field Crops			
Vegetables	panwal,		
Vegetables			
Others			
Others			

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

Molecules	Crops	Key Brands	Approx. Volume
prothiochlorol		light	500 lt
proquat		carb meam	500 lt
chlorphox (G)		Round up speed	500 lt

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

Molecules	Crops	Key Brands	Approx. Volume
metebuza	panwal	cosmic 120	
mancozeb	panwal		
Amistar (Azoxystrobin)		Amistar	

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

Molecules	Crops	Key Brands	Approx. Volume
chloroxypropy		shrike 450	1000 lt
Asat ampid.		EK Kc	10 dls

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

Products	Crops	Key Brands	Approx. Volume
Zinc Boron	panwal	Day trace 700	20 dls
copper sulphur		Organic High zinc	50 lt
Nitro. Vitak		Agro nut. soil	15 bags
		Neo mix	

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

Name of the Product	Quantity	
	Year 1	Year 2
Herbicides		
Herbicides	2000 lt	1000 lt
Fungicides	120 lt	
Fungicides		
Pesticides		
Pesticides	2000 lt	500 lt
Micronutrients		
Micronutrients	50 lt	50 lt

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

Field Demo, Campaign, Farmer Meeting

PART B: BUSINESS BACKGROUND OF APPLICANT

- 13) Year of Establishment:
- 14) Number of years for which you are dealing in Pesticides / Micronutrients: 14 / 20
- 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
Bongaon,		1. 2. 3.	
Tangra		1. 2. 3.	
Ashau		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) Pesticide, fungicide, Micronutrient.

- 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

grain business. (grain seeds) & Raisinate

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 entering 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 representative.
 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@universallagi.in or by calling the Customer Care Helpline at +91 8336629010.
 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 system. In case of any issues, the Distributor is required to contact the SO urgently after receiving this 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 must immediately inform the company about the discrepancy, written 48 hours of receiving the material by sending an email to customer.care@universallagi.in. If the Distributor does not inform the company about the discrepancy, it will be assumed that the Distributor has received the material in full or part load. At the point of receiving the material, the Distributor should verify the quantity, weight and condition of material 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@universallagi.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.
 6. 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 or full either by way of deduction from the bill or through a Credit Note.
 7. 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.
 8. 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@universallagi.in. In the absence of any such emails or other documented communications, it will be assumed that the material received is as per invoice.
 9. 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@universallagi.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.
 10. 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@universallagi.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.
 11. 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.
 12. 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.

Handwritten notes: "P-205011" and "P-205011" with a checkmark.

PART D: FINANCIAL INFORMATION OF APPLICANT

30) Primary Bank Account of Business*:

Name of the Bank

STATE BANK OF INDIA

Name & address of Branch

BARNAKURIA SIA SIA DHARMAKURIA

IFSC Code of Branch

SBI00007004

Account No. 37937183715

Type of Account: Savings/Current/OD

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

If Yes, Name of Bank

Name & address of Branch

CC/OD Limit (Approx. in Rs.lakhs)

Security Deposit* of Rs. 20000 paid through Cheque No. / RTGS

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

If Yes, approx. size 200sqm Address: DIO

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

If Yes, approx. size 200sqm Address: DIO

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 Pesticide License
6. Signed copy of Micronutrient License
7. Statement of primary bank account(s) of business evidencing debit and credit transactions, for the last 3 months
Additional documents for Partnership Firm
8. Signed copy of registered partnership deed
9. 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

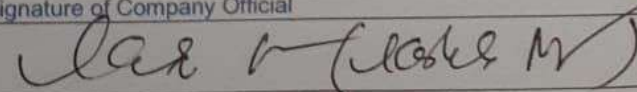
Email ID: uaci.ngp2@gmail.com / customer.care@universialagri.in

Mobile No: +91 7410040857 / 8336929010

For Internal Use

Checklist for Sales Team Member Opening Distributorship		Yes	No
Particulars			
Distributorship Form			
1	14 Mandatory fields on Page 1 filled up		
2	4 Mandatory fields on Page 2 filled up		
3	2 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 6		
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 Pesticide 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		
	Signed copy of Pesticide 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		
	Existing Distributor of UACI Seeds & Biotech/ Swarna Seeds		
	Effect on Existing Network		
	Name of the nearest distributors (can be more than 1):		
	Distance from the nearest distributors:		

Proposed Business Volume for this FY (in Rs Lakhs)	5 lacs
Credit Limit Required (in Rs Lakhs)	1 lac

Approved By: (all forms have to be approved by respective GICs)	
Name of Company Official	Signature of Company Official
Keshab Majumdar	

Proposed


 ভারতের নির্বাচন কমিশন
 পश्चिम পরা
 ELECTION COMMISSION OF INDIA
 IDENTITY CARD

UEC1727650





নির্বাচকের নাম : প্রসেনজিৎ পাল
 Elector's Name : Prosenjit Pal
 পিতার নাম : বিশ্বজিৎ পাল
 Father's Name : Biswajit Pal
 লিঙ্গ/সঙ্গ : পুং / M
 জন্ম তারিখ : 08/07/1998
 Date of Birth : 08/07/1998

UEC1727650

ঠিকানা:
 হালদার পাড়া, ব্রাহ্মণ পাড়া, পাল পাড়া, মাস
 পাড়া, ঘাটবাঁওড়, বনগাঁ, উত্তর ২৪
 পরগণা-743235

Address:
 HALDER PARA, BRAHMAN PARA, PAL PAR
 ,DAS PARA, GHATBAOR, BONGAON,
 NORTH 24 PARGANAS-743235


 Date: 13/01/2017

95 - বনগাঁ উত্তর (তপস্বীনি জাতি) নির্বাচন কেন্দ্রের
 নির্বাচক নিবন্ধন অধিকারিকের স্বাক্ষরের অঙ্গীকারিতা

Facsimile Signature of the Electoral
 Registration Officer for
 95 - Bangaon Uttar(SC) Constituency

ঠিকানা পরিবর্তন হলে নতুন ঠিকানায় জেটার লিখে নাম
 তোলা ও একই নম্বরের নতুন সঠিক পরিচয়পত্র পাওয়ার
 জন্য নির্দিষ্ট ফর্মে এই পরিচয়পত্রের নথ্যটি উল্লেখ করুন।
 In case of change in address mention this Card No.
 in the relevant Form for including your name in the
 roll at the changed address and to obtain the card
 with same number

91 / 950

প্রোঃ- প্রসেনজিৎ পাল
 ঘাটবাঁওড়, উত্তর ২৪ পরগণা,
 পিন-৭৪৩২৩৫

Prosenjit Pal

8942858915



ভারত সরকার
Government of India

Enrollment No. : 1040/79211/02552

To
Prosenjit Pal
S/O: Biswajit Pal
Ghatbaor
Ghatbaor, North 24 Parganas
West Bengal - 743235
8972251211

23/09/2016



KH464221765FT

46422176



আপনার আধার সংখ্যা / Your Aadhaar No. :

6767 2891 6087

আধার - সাধারণ মানুষের অধিকার



ভারত সরকার

Government of India

প্রসেনজিৎ পাল
Prosenjit Pal
পিতা : বিস্বজিৎ পাল
Father : Biswajit Pal

জন্মতারিখ / DOB: 09/07/1998
পুংস্ব / Male

6767 2891 6087



আধার - সাধারণ মানুষের অধিকার

প্রোঃ- প্রসেনজিৎ পাল
ঘাটবাঁওড়, উত্তর ২৪ পরগণা,
পিন-৭৪৩২৩৫

Prosenjit Pal.

8942858915



Government of India



তথ্য

- আধার পরিচয়ের প্রমাণ, নাগরিকত্বের প্রমাণ নয়।
- পরিচয়ের প্রমাণ অনলাইন প্রমাণীকরণ দ্বারা লাভ করা যায়।

INFORMATION

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

- আধার সারা দেশে মান্য।
- আধার 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.



ঠিকানা: এম/ও: বিস্বজিৎ পাল
ঘাটবাঁওড়, ঘাটবাঁওড়, উত্তর ২৪ পরগণা
পশ্চিম বঙ্গ,

Unique Identification Authority of India

Address: S/O: Biswajit Pal,
Ghatbaor, North 24
Parganas, Ghatbaor, West
Bengal, 743235

6767 2891 6087



1947
1800 300 1947



help@uidai.gov.in



www.uidai.gov.in



FORM III

**Govt. of West Bengal
Dept of Agriculture**

office of the **DDA (Admin)** North 24 Parganas

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

1. License Number **P09779**

License to **Sell,stock/exhibit for sale/distribution of insecticides** for District : **North 24 Parganas** in the premises situated at **Annexure - A**

is granted to -

M/s **PROSENJIT PAL**

Shop Address :

Jl no : 61 , Dag no : 495 , Khatian no : 944 , Road : BONGAON TO HALENCHA ROAD(GHATBAOR) , Mouza : Ghatbaor , Block : BONGAON , Subdivision :Bangaon , District :North 24 Parganas , State :West Bengal

Email : **palprosenjit11@yahoo.com**

Mobile no : **8942858915**

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** :

SAMBHU PAL (Graduate with degree in Science with Chemistry/Zoology/Botany)

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 : _____

প্রোগ্রাম - প্রসেনজিৎ
ঘাটবাড়ী, উত্তর ২৪ পরগণা
পিন-৭৪৩২৩৫

(Signature of the licensing officer)

**Licensing Authority
&
Deputy Director of
Agriculture(Administration)
North 24 Parganas, Barasat**