

APPLICATION FOR AUTHORISED STOCKIEST FOR COUPLING

- 1. Name of the firm/Company :
- 2. Date of Registration :
- 3. General Information :

Office/Show Room Branches Service Warehouse

- a. Address :
- b. Tel. No/Fax No./GRAMS :
- c. Weekly Off :
- d. Working Hours :
- e. No.of Employees :

Sales : _____ Service: _____ Administration: _____

4. Constitution of firm : Proprietorship Partnership

Pvt.Ltd Co./ Public Ltd Co. Others – specify _____

Name(s) of Proprietor Partner/director	Age [yrs]	Qualification	Resi. Address	Tel. No.	Details of other occupation

5. DETAILS OF PARTNERS/DIRECTORS/EXECUTIVES INCHARGE OF SALES OPERATION.

Name	Age [Yrs]	Qualification	Experience	Authorization to Sign cheque

6.

- a. Is any of your Partners/directors /Employees Related to) Any of our Employees/Ex-
) Employees/Directors/Existing
) Dealers or their relatives
)
)
)
)
)
)
- b. If yes, give name and other details)

7. Details of Bankers :

Banker's Name	Address	Tel No.	Credit Enjoyed	Nature of Credit

8. Total Business Turnover during last three years (Period – April to March)

Name of Principal Co.	Products Sold	Annual Sales [Rs. In Lacs]	Credit Terms	Year of Appointment as authorized dealers	Validity of Dealership	Servicing Selling

9. FINANCIAL STATUS REPORT (VALUE IN RS. LACS)

Particulars	YEARS		
	2008-2009	2009-2010	2010-2011
Total Sales			
Net Profit			
Own capital			
Long Term Loan			
Current Assets			
Debtors			
Stocks			
Less : current liabilities			
Sundry creditors			
Bank overdraft			
Net working capital (current)			
assets-current liabilities			

10. Tax Registration Details :

a. Central Sales Tax Registration :

b. State Sales Tax Registration No.:

c. Income tax Permanent A/c No. :

11. Details of Salesman/Technical employed :

Name	Age [Yrs]	Qualification	Experience	Designation	Full time/Part time Employment

12. Details of Business with Important direct to Customers :

Name of Customers	Annual Business (Rs. in Lacs)
-------------------	-------------------------------

- a.
- b.
- c.
- d.

13. Details of Business through Important Sub dealers :

Name	Annual Business (Rs. in Lacs)
------	-------------------------------

- a.
- b.
- c.

14. Details of Associate Firms/Companies, if any :

Name of Associate Co/ Firm	Address	Products sold	Annual Turnover (Rs. in lacs)	Places where Show room Available
-------------------------------	---------	------------------	----------------------------------	--

- a)
- b)
- c)

15. Expected guaranteed annual business for our Products (Product wise) Value Rs. in Lacs

I Year

II Year

III year

16. Extend of investment you intend to make in our Products :

Own Investment : Rs. _____

Bank Finance : Rs. _____

Name & Address of Bank :

17. Territories you wish to cover :

18. Details of vehicle facility available for () :
Sales/Sales Promotion/Delivery of Goods)

Dated : Signature :

Place : Name :

Designation :

Notes :

- 1) Use additional sheets(s) if space provided for any information is not sufficient.
- 2) In the event of any change in above data, kindly submit such fresh data immediately.
- 3) Enclose a copy of Memorandum & Article of Association/current Partnership Deed.
- 4) Enclose Bankers Report.
- 5) Enclose your latest Profit & Loss Account and Balance Sheet.
- 6) If there is any additional information you wish to furnish, the same may please be sent along with this application.

* * *