

# DISTRIBUTOR PROFILE FORM

(Application for Authorized Distributorship)

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## 1. Basic Company Information

- Firm Name: \_\_\_\_\_
  - Constitution: ☐ Proprietorship ☐ Partnership ☐ Pvt. Ltd. ☐ LLP ☐ Others
  - Year of Establishment: \_\_\_\_\_
  - Registered Office Address: \_\_\_\_\_
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- Warehouse Address (if different): \_\_\_\_\_
  - GST Number: \_\_\_\_\_
  - PAN Number: \_\_\_\_\_
  - CIN (if applicable): \_\_\_\_\_
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## 2. Contact Details

- Contact Person Name: \_\_\_\_\_
  - Designation: \_\_\_\_\_
  - Mobile Number: \_\_\_\_\_
  - Alternate Contact Number: \_\_\_\_\_
  - Email ID: \_\_\_\_\_
  - Website (if any): \_\_\_\_\_
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## 3. Business Profile

- Nature of Business:
  - ☐ Distributor
  - ☐ Wholesaler
  - ☐ Retailer
  - ☐ Super Stockist
  - ☐ Others
- Products Currently Dealing In: \_\_\_\_\_

- Key Brands Represented: \_\_\_\_\_
  - Territory Covered (City/State): \_\_\_\_\_
  - Number of Retailers Served: \_\_\_\_\_
  - Monthly Sales Turnover (Approx.): \_\_\_\_\_
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## 4. Infrastructure Details

- Warehouse Area (Sq. Ft.): \_\_\_\_\_
  - Storage Type: ☐ Owned ☐ Rented
  - Number of Sales Staff: \_\_\_\_\_
  - Number of Delivery Vehicles: \_\_\_\_\_
  - Computerized Billing: ☐ Yes ☐ No
  - ERP Software Used (if any): \_\_\_\_\_
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## 5. Financial Information

- Annual Turnover (Last FY): \_\_\_\_\_
  - Bank Name: \_\_\_\_\_
  - Branch: \_\_\_\_\_
  - Account Type: \_\_\_\_\_
  - Credit Facilities Currently Availed: \_\_\_\_\_
  - Expected Monthly Purchase from Our Company: \_\_\_\_\_
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## 6. Market Strength & Capability

- Main Market Segments Served: \_\_\_\_\_
  - Experience in Similar Product Category (Years): \_\_\_\_\_
  - Existing Distribution Network Strength: \_\_\_\_\_
  - Why do you want to become our Distributor?
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## 7. Trade References

1. Company Name: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: \_\_\_\_\_
  2. Company Name: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: \_\_\_\_\_
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## 8. Documents Required (Attach Copies)

- ☐ GST Certificate
  - ☐ PAN Card
  - ☐ Cancelled Cheque
  - ☐ Firm Registration Certificate
  - ☐ Address Proof
  - ☐ Latest Bank Statement (Last 6 Months)
  - ☐ Aadhar Card (Proprietor/Director)
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## 9. Declaration

I/We hereby declare that the information provided above is true and correct to the best of my/our knowledge. I/We understand that submission of this form does not guarantee appointment as Distributor and is subject to company evaluation and approval.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Company Seal:

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*Please note that: The Appointment will be subject to approval of management and signing of a formal Distributor Agreement.*