

ELTEX MARKETING LLP.

1-E, Sriv<mark>ar</mark>i Shaswaat Apartment, 268/2 Race Course Road, Coimbatore – 641018 Tamil Nadu, India

E-Mail: corporate@eltex.in

Contact: +91 90034 - 44981

NEW DISTRIBUTOR EVALUATION & APPOINTMENT FORM

TERMS OF BUSINESS FOR DISTRIBUTOR

About You

Name

Residential Address	CTAT		Own Rented		
District/ State/ Pin code	DVVI			At	
Telephone	Residence	_	Mobile		
Your Business	Jan and		* inch	iy , _	
Name of Your Firm	CEOCHD .	wie 6	De of	FEV.	
Address					
	SWAHAA OST	WAHAAR	STATALET A. A. T		
Tel SWAHAAF SWAHA	Fax:	E mail:		Website: A R	
Name of the Proprietor/ Partners: Indicate Managing Partner/ Contact Person	1.		2.	SAMBA RAVA	BOKUN WHEAT
	3.		4.		
	Date of establishment		GSTIN No. (Please atta	ach a scan/ Xerox c	copy)
Name of Business: Details of your business in distribution and other family/ group business with brief history					3 444

Working as distributor for: include all business in group/sister concern giving detail separately **Payment Payment Company Name** Product Period in years Area Turnover terms with terms with (in lakhs) **Trades** company PRESENT PAST **Facilities You Offer** ☐ Own Office Address & Tel Rented Own Godown Address & Tel □ Rented Storage Capacity & Type of construction Own **Delivery Vehicles** Rented **Accounting & Invoicing system** Details of Accounting system / Program used Modern methods of communication used

Manual

Computerized

the state of the s		400						
Field Salesman		-	Cycle Salesman	FITEX				
Delivery Vans – Drivers			Labors					
Name of Your Transporter								
Your Financer			Your Banker					
Banker's Address				1				
Account No. of Pass Book / Last Account statement for			dit/ Saving/Over Draft. Please					
orrass book / East Account statement is	or the sai	ne account you	Will deal with Litex Marketin	6				
Limits Provision for investment in Eltex	Own Rs.	No 0	Pa	nk Finance Rs.				
Marketing LLP	OWII KS.	ballk Fillalice RS.						
Your Market								
Local Octroi % Local Levies, Taxes (if any	Total No of ou	utlats in the Area proposed	No. of outlets – serviced by the party					
Local Oction % Local Levies, Taxes (II ally)		Total No of outlets in the Area proposed		No. of outlets – serviced by the party				
	+		\ \ \ \ \ \					
Frequency of visits: Daily/ Weekly/For nightly		Credit offer to the Trade		Closing day of the Market (if any)				
Bazaar Day (if any)	Proposed area	a for distribution	Expected Turnover					
	eeco o	are good						
The Terms and C <mark>onditions</mark> are agre <mark>eab</mark> le	e.		Pacammondations					
	Recommendations							
Applicant Distributor's Stamp & Signatu	re	A CYAT	Recommended by SR /	SO				
			ELTEX MARKETING LLP					
() SWAHAAI () SWAH.		WEKNEN	HIND ATTA	SWAHAAR				
		For Of	fice Use Only					
Approved and Appointed by	0.0	(W	45					
Authorized Signatory Head of Sales/RSM								
Authorized Signatory Sales Officer	1 2	MAL.						
Authorized Signatory (Accounts Depart	ment)							
Distributor Code								
Date of Activation								
ATTA MAIDA HOASTED SOOJI SJ	IMBA RA	VA BROKEN	WHEAT ROASTED VERMICI	LLE LONG CUT VERMICILLE ADA				

Accounts

Supervisors