STOCKIST/Distributorship appointment form:											
1)	Name and Education Of Applicant:										
2)	Addro	Address:									
3)	Telephone No. (O) (P)										
	(M)										
4)	Email:										
5)	Constitution: Proprietor/Partner/Pvt. LTD.:										
6)	Authorised Person Name:										
7)	Addre	Address:									
")	7 Iddi										
8)	S. No.	Partner/Director name	Relation	Address	Ph No.	Age					
0)	~ 1	m . v									
9)	Sales Tax No. Local No. TIN: CST:										
10)	Present Business/ Occupation:										
	and the second of the periods.										
11)	Present Business status: (a) C&F (b) Distributor (c) Dealer										
12)	How long has the business been:										
13)	Present business facility:										
	(A)Showroom(in sq. ft.)										

	(B)Office (in Sq. Ft.)										
	(C)Go Down (in Sq. Ft.)										
14)	Manpower Strength:										
	(a) Sales and Marketing										
	(b) Services										
	(c) Office										
	(d)Go Down										
15)	Presently associated with :										
	S.No.	Company Name	Status	How long with company	Yearly turnover						
			•								
16)	Total Yearly Turnover:										
17)	Bankers Name: (a)			Branch:							
	(b)			Branch:							
	Name:		Signature:	Date:							
	Seal of C	Company		For Surya Oil & Agro Industries							
	Authorised Signatory										