

Application Form For Overseas Distributorship of MELAM.

A	1	Name of the firm			
	2	Address			
	3	Name of the Proprietor/ Managing Partner/ Managing Director			
	4	Residential Address of Proprietor/ Managing Partner/ Managing Director			
	5	Telephone Nos. (with ISD Code):			
		a) Office			
		b) Residence			
		c) Fax No. with ISD Code			
		d) E-mail id			
	6	Name of the Bank/ Banks			
7	Annual Turnover (Previous Financial year)				
B	Details of the Area for Dealership				
	1	Name of the main area and its boundaries			
	2	Name of the main places covered by you			
	3	How many shops will you cover in that area	Retail	Wholesale	Hotel/ Institutions
4	Any other details				

C		
Details of present Distribution Infrastructure		
1	Present Distribution Line/s	
2	a) Number of Years of experience	
	b) Number of Salesman	
	c) Number of Vehicles for delivery	
	d) Frequency of supply	Weekly / Biweekly
3	a) At present do you deal in any other similar products	Yes / No
	b) If so, name of the Brand and its last month's turnover	
D		
If appointed as a Distributor		
1	How many containers you can lift in one year	
2	What will be the quantity of your order in containers (Quarter-wise)	
3	What will be the quantity of your first order (in containers)	
4	When will you be ready to start Operation	
	a) Placing the order within	5 Days / 10 Days
	b) After confirmation of the order when will you make the payment within	3 Days / 7 Days
	c) Make the payment	TT / Irrevocable LC At Sight