



Taj group of companies

TAJ PHARMACEUTICALS LTD.

Regd. Office - 434, Laxmi Plaza, Laxmi Industrial Estate,
New Link Road, Andheri (W), Mumbai - 400 053.
P.H. : 91-22-2637 4592, 91-22-2637 4593, FAX: 022-2634 1274.

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tajpharmaceuticals@rediffmail.com

APPLICATION FORM FOR DISTRIBUTORSHIP / DEALERSHIP

PHOTO

WORKING AREA

Name of the Working Area

Block Name/Ward : District :

State Pincode.....

Application for : Distributorship Dealership Stockiest DMA

A. GENERAL INFORMATION:

1. Name of the Firm :
2. Nature of the Firm : Proprietary Partnership Pvt. Ltd. Co. Public Ltd. Co.
3. Names of Partners / Directors : 1..... 2.....
4. Address of the firm :
(Rubber Stamp Preferable)
5. Contact person and Designation :
6. Contact Nos. with STD Codes : Code No. : Res.: Off.:
Mobile : Fax :
E-mail :

B. BUSINESS INFORMATION :

1. Year of establishment :
2. Nature of Business :
3. Annual Turnover (Approx.) :
4. Brands dealt with : 1..... 2.....
3..... 4.....
5. Office space :
6. Branches / Dealers (if any) : 1.
2.
3.
3.
7. Customer base :
8. Godown space :
9. Banker's Name & Address :

10. Bank limits enjoyed :
11. Outstanding litigation, if any :
12. Sales Tax Registration details :
13. No. of employees : Managers Salesmen Technicians Delivery Boys
14. Any achievements / appreciation from the principal companies :

C. BUSINESS INTEREST:

1. Product Interested in : **Allopathics Products** **Ayurvedics Products**
 Herbals Products **O.T.C. Products**
2. Main Strength : C & F Agency - no. of dealers covered
- Direct Marketing - no. of front line sales force
3. **Can Invest upto Block/** : **Rs.10,000 - 20,000** **Rs. 20,000 - 30,000**
Wards Label Dealers/ Stockiest : **Rs. 30,000 - 40,000** **Rs. 40,000 - 50,000 (and Above)**
4. **Can Invest upto** : **Rs.75,000 - 1,00,000** **Rs.1,00,000 - 2,00,000**
Zone/ Dist. Label Distributor
5. Would you like to be a business :
Partner for (area) :
6. Any specific locational advantage : a) b)
(such as hill stations etc) c)
7. Do you like to take the products as : Separate profit center as part of my business
8. How many people can you apportion : Salesman Service Technician for this business
9. Can you undertake the after sales : Yes No
service for the products
10. Expected annual turnover from Taj Group Products :

I, S/o..... do hereby declare that the information furnished above is true to the best of my knowledge and belief. I hereby apply for distributorship / dealership of **TAJ PHARMACEUTICALS LTD.**

Place : (Signature of Distributor / Dealers)

Date :

Apply for Last Date : 02/08/05 (Signature of Distributor / Dealers)

Instruction to fill Up the Form :

- 1) Fill up the form carefully & Tick Mark as per your availability.
- 2) Please attach your recent photograph & any Identification Proof along with this application.
- 3) Any incomplete Form is not acceptable; if you want to do business more than one area then you has to fill up another form.