



**BIHAR STATE MILK CO-OPERATIVE FEDERATION LTD.  
DAIRY DEVELOPMENT COMPLEX, P.O.- B.V. COLLEGE  
PATNA- 800014**

Phone No- 2228953,2228347, Fax No-0612-2228306  
E-Mail: [marketingcomfed@gmail.com](mailto:marketingcomfed@gmail.com), Website: <http://www.sudha.coop/>

**APPLICATION FOR APPOINTMENT AS DEALER/ DISTRIBUTORS FOR SALIL SUDHA  
PACKAGED DRINKING WATER**

Passport  
Size  
Photograph of  
Applicant

**Areas intended for distributorship of Salil Sudha Packaged Drinking Water: .....**

- 1. Name of applicant (Block letters):**
- 2. Date of birth & age :**
- 3. Educational qualification :**
- 4. Office address/ correspondence address:**
- 5. Registered Name & address of the Firm:**
- 6. Whether Proprietorship or Partnership firm:**
- 7. Contact details:Office Nos.: Mobile Nos.:  
E-mail address:**



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**8. Registration Details (to be supported by document)**

- a) GST:
- b) PAN Number:
- c) Adhar Number
- d) FSSAI License Details:(If available)

**9. Nature and details of present line of business:**

S.NO	PRODUCTS/ SERVICES	COMPANY	AREA OF OPERATION	WORK PERIOD

❖ Preference will be given to parties having experience in Beverages/ FMCG and HORECA segment (Supporting documents may be attached- Work Order/invoice/agreement).

**10. Name and Address of Banker:**

**11.Expected lifting per month of Salil Sudha Packaged Drinking Water per month that can be assured by theParty if appointed as Distributor.**

a) Sales (ltrs) :

b) Value (Rs.) :



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**We hereby certify and declare that:**

1. The details / documents furnished by us above are true to the best of our knowledge. In case COMFED finds any of the information / documents furnished false / fraudulent, COMFED can cancel the distributorship without notice.
2. In future, regarding any significant changes in the details furnished above, we undertake to inform COMFED regarding the same in writing.
3. We understand that the Business dealings with COMFED regarding this distributorship / are on principal-to-principal basis.
4. We shall enter into an agreement within 15 days of issuance of order and should ensure the submission of security deposit before commencement of work.
5. We shall take all possible steps to achieve maximum sales of Salil Sudha Packaged Drinking Water and proper coverage to all the retail outlets in the allocated area. We would not indulge in intruding into other's territory.
6. We shall provide all facilities for adequate and efficient distribution of Salil Sudha Packaged Drinking Water.
7. We shall store Salil Sudha Packaged Drinking Water in a hygienic manner with due care without causing damage to the goods.
8. We shall comply with all the statutory requirements and rules in force from time to time and we undertake to keep COMFED indemnified from the consequences arising out of any lapse on our part in observing the statutory requirements.
9. We agree to provide all kinds of information regarding statistics and market information from time to time as required by COMFED.
10. We guarantee that all outlets will be covered fully.
11. We agree that in case of any failure to comply with T & C of the agreement, COMFED shall be free to appoint other distributor and/or make direct supplies to other parties without any reference/ compensation to us.
12. We undertake to sell to all the outlets and clients at prices prescribed by COMFED from time to time and will not indulge in changing the price structure.



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13. We shall provide a free delivery service to all outlets in the area allocated and shall not insist on clients to buy case-lot quantities.
14. COMFED reserves the right to modify/amend any or all the terms and conditions stipulated for appointment of distributor.
15. The dealer/ distributor shall make a deposit of the security amount for Rs. 10,000/- (Rs Ten Thousand only) through RTGS/NEFT (in account no HDFC A/C no.50100185071108 and IFSC Code no.HDFC0002643 ) or through DD in favor of Bihar State Milk Cooperative Federation Ltd., Payable at Patna which is to be deposited before the commencement of work, on which no interest is payable.

**Date:**

**Signature of the applicant**

**Place:**

**With seal of firm**