Distributorship Application Form

**Orion Gas Limited**

**Distributorship Application Form**

Name Of the Business Organization ..............................................................................................................

Name Of Busiess Owner ................................................................................................................................

Applicant’s Address

Applicants Photograph

(2 Copies Attested)

Present ..............................................................................................................................................

..............................................................................................................................................

Permanent ........................................................................................................................................

..............................................................................................................................................

Contact Details

Cell ..................................................... Mobile ...................................................

Fax ..................................................... E-Mail ....................................................

National ID no of Applicant .............................................................................................................

Emergrncy Contact

Name ................................................................................................................................

Address .............................................................................................................................

Contact No .......................................................................................................................

**Business Information**

Current Business (Types) 1. ...............................................................................

2. ...............................................................................

3. ................................................................................

4. Others ....................................................................

Address of Current Business

Present ..............................................................................................................................................

..............................................................................................................................................

Permanent ........................................................................................................................................

..............................................................................................................................................

TIN no .............................................................................................................................................................

Trade License no ............................................................................................................................................

Do you have experience as Distributor in LPG sector Yes/No

Propose Area/Territory

District Name .........................................................................................................................

Thana Name ..........................................................................................................................

If you are currently in LPG Distributionship Business, Describe your Portfolio below

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Company Name | Investment | Source of Investment (Own/Loan/Others) | Monthly Turnover | Duration of Business | Remarks |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Can you Currently Facilitate a warehouse? Yes/No

If yes, please provide details

Warehouse Address .......................................................................................................................................

Ownership Details Owned/Rented/Lease

Area in sqft .....................................................................................................................................................

Cylinder Storage Capacity in pcs ....................................................................................................................

Do you have own transportation facilities? Yes/No

If yes, please provide details

|  |  |  |
| --- | --- | --- |
| Vehicle Type | No of Vehicle | Cylinder Capacity |
| Truck |  |  |
| Pick-Up |  |  |
| Open Van |  |  |
| Others |  |  |

Personnel Details of your Organization

|  |  |  |  |
| --- | --- | --- | --- |
| Description | No of People | Monthly Salary | Remarks |
| Manager |  |  |  |
| Sales Man |  |  |  |
| Delivery Man |  |  |  |
| Others |  |  |  |

Financial Aspects

Funding status in order to receiving the ‘Orion LPG’ Distributionship

Own Fund (BDT) ................................................................................................................................

From Bank .........................................................................................................................................

Details of Bank(s) you maintain your regular transaction with

|  |  |  |
| --- | --- | --- |
| Name of Bank | Branch | Monthly Transaction (BDT) |
|  |  |  |
|  |  |  |
|  |  |  |

Current Credit Arrangement with any Bank?? Yes/No

If yes, please give details

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Bank | Branch | Arrangement | Credit Limit |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Mode of Payment you wish to Maintain DD/TT/Pay Order/On-Line

The following papers/documents are required to be enclosed herewith the application form

1. An application on company letter head
2. Two copies of passport sized photographs
3. Trade license (Attested Photocopy)
4. TIN certificate (Attested Photocopy)
5. VAT ragistration (Attested Photocopy)
6. NID Photocopy
7. Explosive license (Attested Photocopy)
8. Bank Statement of last 6 months

“I hereby certify that the above statements are correct in all respect. Any false statement if arises will cause cancellation of my distributionship.”

Applicant’s Signature

Applicant’s Name

Date & Seal

**Please send the completed application to:**

Orion LPG Limited

***Enter Address Here***