



## Distributor Application Form

- This docket contains the following forms:*
  - Form a: Personal Profile (To be filled by the first and additional Applicants.)*
  - Form b: Organization and location profile Details of the Distributor.*
  - Form c: Industry Expertise*
  - Form d: Market Potential Survey*
- Please attach supporting documents wherever asked for or necessary.*
- Please use separate sheets wherever required.*
- Submission of this application form does not guarantee the approval of Distributorship. The Company has the right to reject or accept the application form for without assigning any reasons*
- Please do not leave any clause / column blank. Mention 'No' or 'NA', if and wherever applicable.*
- Sign and stamp all the pages of all the forms.*
- The Completed pack marked 'CONFIDENTIAL' with all the enclosures should be couriered / mailed back to:*

**Rajiv Varma**  
**IQUBX Private Limited**  
**B-19, Ground Floor, Kiran**  
**Garden, Uttam Nagar West,**  
**New Delhi (110059)**  
**Delhi (India)**

**Mobile : +91 - 9717291836**

**Email : [info@iqubx.com](mailto:info@iqubx.com)**

**Website : [www.iqubx.com](http://www.iqubx.com)**

**NOTE: Please Email the soft copy of all the documents on the above email address.**



**Form a.: PERSONAL PROFILE**

*Separate form is to be filled by all the stake holders / Partners / Distributors*

Affix  
Photograph

Name of the first / other applicant \_\_\_\_\_

\_\_\_\_\_ DOB: \_\_\_\_\_

PAN Number (Please attach ID proof along with the copy of PAN Card) \_\_\_\_\_

**Permanent Address**

**Communication Address**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Pin: \_\_\_\_\_

\_\_\_\_\_ Pin: \_\_\_\_\_

Tel. Nos. (O) \_\_\_\_\_ (R) \_\_\_\_\_ (M) \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Qualifications**

Degree / Diploma / Certificate	University / Institution	Subjects	Year of Passing

**Business / Employment experience (If any)**

Nature of Involvement (Prop./Partner/ Director or Designation)	Name of Organization	Nature of Business	Turnover	Nature of Work	Salary Drawn	Year		Products	No. of Employees
						From	To		

**Annual Family Income:** \_\_\_\_\_

**DECLARATION**

I declare that the above details and information provided by me are true to the best of my knowledge and belief.

Date : \_\_\_\_\_

Signature : \_\_\_\_\_

Place : \_\_\_\_\_

Name : \_\_\_\_\_



**Form b.: ORGANIZATIONAL DETAILS**

City  Number of Municipal zones in City

Municipal Zone

**Category Applied for:**

Regional Stockiest	Stockiest	Distributor
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**Current Name and Address of the Distributor Organization:** \_\_\_\_\_

\_\_\_\_\_

**Name and Address of location in which distributorship is to be taken:** \_\_\_\_\_

\_\_\_\_\_

**PAN No. of Organization**(Please attach ID proof along with the copy of PAN Card) \_\_\_\_\_

**Type of Organization:**

<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Private Limited Company	<input type="checkbox"/> Individual
<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Limited Company	<input type="checkbox"/>

**Details of Promoters/Directors/Partners :**

Name	Age	Proposed share holding in Distributorship	Other Business Activities	Whether worked somewhere	Nature of duties & responsibilities

**Please elaborate the reasons for getting into this business or any listing / links / experience in sales and marketing of similar products / product categories:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Your SWOT Analysis for your distribution business with IQUBX:**

Strengths \_\_\_\_\_  
\_\_\_\_\_  
Weakness \_\_\_\_\_  
\_\_\_\_\_  
Opportunities \_\_\_\_\_  
\_\_\_\_\_  
Threats \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Current infrastructure, which can be made available for Distributorship Operations**

- Whether having any premises?  
    a. YES                              b. NO
- If yes, nature of premises  
    a. Owned                              b. Rented
- Covered Area (In Sqft.) : \_\_\_\_\_

**DECLARATION**

I declare that the above details and information provided by me are true to the best of my knowledge and belief.

Date : \_\_\_\_\_    Signature : \_\_\_\_\_  
Place : \_\_\_\_\_    Name : \_\_\_\_\_



**Form c.: INDUSTRY EXPERIENCE**

**In case you are already engaged in the Interior & Building industry, please give the following details :**

Name of the Organization: \_\_\_\_\_  
\_\_\_\_\_

Nature of Association: Working / Franchise / Owned / Active Partner / Sleeping Partner / Others

Please Specify \_\_\_\_\_  
\_\_\_\_\_

Total No. of years of Association : \_\_\_\_\_

Total Annual Turnover last year : \_\_\_\_\_

No. of staff : Total \_\_\_\_\_ Managerial \_\_\_\_\_ Executive \_\_\_\_\_ Others \_\_\_\_\_

(Attach brief profile of your managerial and executive staff)

Total Area being used (sq. ft): \_\_\_\_\_

**Please mention your marketing expertise in brief.** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please describe briefly, the basic Business strategy you have in mind to develop IQUBX Distribution Business in your area (Fill it even if you don't have any experience in the Interior & Building Industry)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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### **DECLARATION**

I declare that the above details and information provided by me are true to the best of my knowledge and belief.

DATE : \_\_\_\_\_

SIGNATURE : \_\_\_\_\_

PLACE : \_\_\_\_\_

NAME : \_\_\_\_\_



**Form d.: MARKET POTENTIAL**

**List of Upcoming commercial complexes & their promoters / Builders:**

Name of Project	Location	No. of Floor and covered area of each floor	Current status	Tentative completion date

**List of Upcoming Residential complexes & their promoters / Builders:**

Name of Project	Location	No. of Floor with built-up areas	No. of Flats	Tentative completion date

**List of Upcoming Hospitals / Schools / Green certified Projects / Shopping Malls.**

Name of Project	Location	No. of Floor and covered area of each floor	Current status	Tentative completion date

**Upcoming Metro Projects:**

Phase 1		Kms	Phase 2		Kms
From Location			From Location		
To Location			To Location		

**Details of Upcoming Smart Cities in your area** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_