



MANNS GROUP

ADDRESS – S . NO-4, D'SUZA MENSION, NEAR BANRASI HOTEL, NEHRU ROAD , SANTACRUZE, MUMBAI
INDIA – 400055 +91-8417830603 Website: www.mannsinternational.com email-info@mannsinternational.com

DISTRIBUTOR / SUPER STOCKIST APPLICATION FORM

1. NAME OF PROPRIETOR _____
2. FIRM NAME _____
3. ADDRESS _____
4. TIN No _____ GST No _____
5. OTHER ADDRESS _____
6. WEEK OFF _____ WORKING HOUR _____
7. IS YOUR OUTLET (WHOLESALE/RETAIL/ BEAUTY PARLOUR/SALOONS).....
8. AGENCIES/ DISTRIBUTOR SHIP (OPERATIONAL AREA) :- _____
9. CONTACT NUMBER: - _____

COMPANY NAME	AREA	ANNUAL TURNOVER

9. TOTAL FIELD OPERATIONAL STAFF:
- {A} TOTAL NUMBER OF SALES REPRESENTATIVE:
- {B} SALESMEN'S FREQUENCY OF VISIT IN MARKET:
- {C} VAN & SUPPLY SYSTEM:
10. STOCKIST PRESENTLY COVERING AREA:



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11. YOUR WILLING FOR INITIAL INVESTMENT FOR OUR PRODUCTS:.....

12. YOUR BANKERS NAME AND ADDRESS.....

.....

YOUR BANK BRANCH NAME & CODE:

WE CONFIRM THAT COMPANY SHALL NOT BE RESPONSIBLE FOR ANY PERSONAL DEALING IN CASH/STOCK/COLLECTION etc., IF DONE BY US WITH ANY FIELD FORCE/PARTY IT IS YOUR OWN RISK.

PLACE:

SIGNATURE WITH RUBBER STAMP

DATE: