

Distributorship Application Form
GREEN TOWN LP GAS LIMITED

APPLICATION FORM FOR
GREEN LP GAS DISTRIBUTORSHIP

Applicants
Photograph

(2 Copies Attested)

Name of the Business Organization: _____

Name of Business Owner: _____

Applicant's Address:

- Present: _____

- Permanent: _____

Contact Details:

Telephone: _____ Mobile: _____

Fax: _____ E-Mail: _____

National ID no of Applicant: _____

Emergency Contact:

Name: _____

Address: _____

Contact No: _____

Business Information

Current Business (Types)

1. _____
2. _____
3. _____
4. Others: _____

Address of Current Business:

Present: _____

Permanent: _____

TIN no: _____

Vat 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 Distributorship 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:

Number of Warehouse	Address	Owned/Rented/Leased	Area in Sft	Cylinder Storage Capacity (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

Investment Proposition for each of the Brand that you are selling:

Company Name	Business Type (Distributorship)	Cylinder Quantity	Monthly Sell (Refill)	Profit(Per Refill)	Nature/Mode of Payment (TT/DD/Pay order/Online)	No. of years doing business in LPG industry

Funding status in order to receiving the ‘GTL PGL’ Distributorship:

Own Fund: _____

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 (Please give tick mark):

TT

DD

PAY ORDER

ONLINE

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

1. An application on company letter head pad
2. Two copies of passport sized photographs
3. Trade license (Attested Photocopy)
4. TIN certificate (Attested Photocopy)
5. VAT registration (Attested Photocopy)
6. NID Photocopy
7. Explosive license (Attested Photocopy)
8. Bank Statement of last 6 months
9. Warehouse/Showroom (If any) location map, layout and photograph of site.

***“I _____ (Name of the applicant) hereby
certify that the above statements are correct in all respect. Any false statement if arises will cause
cancellation of my distributorship”***

Date: _____

(Signature with Seal)

Please send the completed application to:

Manager (Marketing & Sales)

GTLPGCL

Apartment # Ambon Complex , 99, Mohakhali C/A , (14th Floor) , Dhaka- 1212, Bangladesh.

Cell: 01756222555

E-mail: greentownlpgasbd@gmail.com, Web: www.greenlpgasbd.com