#### " AAVIN "

## (Address of the DCMPU)

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# WSD SATCHET MILK APPLICATION (FOR AUTHORIZED DISTRIBUTORS/DEALERS/STOCKISTS)

Photo of the applicant

	(FOR ACTION)	DISTRIBUTORS/I	JERLENS/ STOCKISTS)	applicant
1.	Name of the Firm/ applicant * If Proprietary Concern – N	ame of the Proprietor:		
2.	Status of the Firm *			
a.	Sole proprietor  b. (if others, pl mention)	Partnership Firm □	c. Ltd. Company [	□ d. Others □
3.	Address of Reg. Office *	:	E-mail: Phone :	
4	In acco Doute english			
4.	In case, Partnership			
	firm	(a) Name :		
		(b) Partner's Name:		
	(Partnership deed/ registr	ation copy to be enclose	ed)	
	If Private/Public Ltd. Co. (Memorandum of Associat be enclosed)			
5.	Year of Establishment of t	he firm :		
6.	Category of items handled and sales details in last 3 years:			
7.	Item/ Product Catg. Size/ Volume Make/ Manufacturer Name of Agency (Enclose a copy of Dealership/Agency approval letter from manufacturers) Name of the preferred area for dealership for sachet milk sales (Please select from the list enclosed) *			
	(a) Priority 1		_	
	(b) Priority 2		_	
	(c) Other uncovered area _			

(Any other area which is not given in the list)

8.	Aadhar No. *	:			
9.	GST No. *	:			
10	. PAN No *	:			
11	. FSSAI No *	:	Valid From	_Valid upto	
	Kindly attach a copy o	of the same.			
		(Please enclosed Photocop	pies of above registration	n certificates)	
12	12. List of existing sub-dealers/ Retailers buying the milk (List along with address and contact no. to be attached) *				
13	13. Name of Bankers * :				
	a) Bank Account no.*				
	b) Type of Account *				
14. IT filed copy for period of 2023-2024 or 2022-2023 (Enclose a copy) *					
15. In case you are/were a Wholesale dealer in the Federation/DCMPU , please					
	mention (If yes then attach purchase order copy with this form)				
	(a) Name of dairy				
	(b) Quantity lifted (in Litre) per day in the last one year (Apr'23 to Mar'24)				
16	16. If the business is discontinued with any of the reasons:				
17. Whether any of your relatives are working with the Federation/ District Union/ Primary Society: No/ Yes, if yes, furnish the details *					
18	18. Any other information you would like to furnish to us				

Signature of the applicant

(Note: if space available for filling any column is inadequate, the details may be separately enclosed)  $Mandatory\ fields\ are\ indicated\ with\ an\ asterisk\ *$ 

#### **DECLARATION**

THE ABOVE INFORMATION IS TRUE IN ALL RESPECTS AND WE UNDERTAKE TO INFORM YOU IF ANY CHANGE IN THE ABOVE PARTICULARS REGARDING OUR BUSINESS FROM TIME TO TIME.

PLACE: SIGNATURE OF

AUTHORISED REPRESENTATIVE DATE: OF THE FIRM UNDER PROPER SEAL

FOR OFFICE USE

WSD NO:

## THE TAMILNADU COOPERTIVE MILK PRODUCERS' FEDERATION LTD./ DISTRICT COOPERATIVE MILK PRODUCERS UNION LTD.

# **CHECK LIST**

Kindly ensure compliance of the under-mentioned requirements, as per terms and conditions.

1.	Whether all pages in the agreement are duly	Yes / No	
	signed by authorized signatory.		
2.	Whether photocopy of the PAN Card enclosed?	Yes / No	
3.	Whether photocopy of the Aadhar Card enclosed?	Yes/ No	
4.	Yes / No		
5.	5. Whether copy of the partnership deed or Article		
	Company Registration certificate with	Yes / No.	
	Memorandum Association and Article of		
	Association is enclosed?		
6.	6. Whether copy of income tax return of last 1		
	years enclosed?		
7.	Any other schedules attached with details		
	i)		
	ii)		
8.	8. Whether letter from the bank enclosed?		
9.	Whether computerized billing facility available?	Yes / No	

## THE TAMILNADU COOPERTIVE MILK PRODUCERS' FEDERATION LTD./ DISTRICT COOPERATIVE MILK PRODUCERS UNION LTD.

#### List of uncovered area

SNO	Region	New Untapped area
1	Central	AVADI:
		Sekkadu, Paruthipattu,
		Veerapuram, Puthiya
		Kanniamman Nagar,
		Bangarupettai, TNPL
		Battalian Force
2	Central	THIRUNINDRAVUR
		Vayala Nallur ,
		Karunakaracherry,
		Nemilcherry, NSK Nagar,
		Tamaraipakkam,
		Kavanur, Karalapakkam,
		Kattur, Uzhaippalar
		Nahar, Velliyur
3	South	THIRUPORUR
		Thandalam, Paiyanur,
		Siruthavur, Pooneri,
		Koothavakkam,
		Mamallapuram
4	North	PONAMALLEE
		Thirumalipakkam,
		Katchipattu, Pennaloor,
		Karathagal,
		Beemanthangal,
		Sivanthangal, Nemili,
		Vadamangalam
5	North	MANALI
		Payaver kadu, Kattur,
		Ennore, Athipattu Pudhu
		Nagar, Kathivakkam,
		Ponneri