

Application Form Appointment of Del Credere Agent cum Consignment Stockist (DCA-cum-CS) For Hindustan Petroleum Corporation Limited



(Please refer the detailed "Selection Guideline for appointment of DCA-cum-CS" before filing the application form.

| | Application No. | Date of Receipt of Application |
|-----------------------|-----------------|--------------------------------|
| (For Office use Only) | | |

| | Demand Draft No. | Demand Draft Date (DD/MM/YYYY) | Name of Bank | Document Ref. No. |
|------------------------|------------------|--------------------------------|--------------|----------------------|
| Application Fee Detail | | | | C2 |
| (Rs. 5000) | | | | CZ |
| EMD Details | | | | C1 |
| (Rs. 2 Lakh) | | | | C1 |

| Sr No. | Header | Details | Document No. |
|-----------|---|---------|-----------------|
| 1 | Location applying for | | - |
| 2 | Nature of Applicant (Proprietary Firm/ Partnership Firm/LLP Firm/ Private Ltd Company/Public Ltd Company) | | C3 |

Details of Firm/Company:

| 3 | Name of Applicant (Firm/Company Name) | C4/C5 |
|---|---|-------|
| 4 | Registered Address of the Applicant (Firm/Company) | C6 |
| 5 | Correspondence Address of the Applicant (if different from above) | C7 |
| 6 | Office phone number of firm/companies | - |
| 7 | Official Email ID of firm/company | - |

To be filled by Proprietary Firm:

| 8 | Name of Designated Person (Name of Proprietor) | | A1 | |
|---|--|--|----|--|
|---|--|--|----|--|

To be filled by Partnership Firm/LLP Firm/Limited Company:

(Maximum 2 designated persons can be nominated)

| 9 | Number of Partners/Directors | C8 |
|----|--|-------------|
| 10 | Name of 1 st Designated Person | |
| 11 | Designation of 1 st Designated Person | A1 and C9 |
| 12 | Name of 2 nd Designated Person (Optional) (In case 2 designated persons nominated) | 711 dild 03 |
| 13 | Designation of 2 nd Designated Person (Optional) | |

14. Details of Partners/Directors

Document Ref. No.C8

| Sr No. | Name | Shareholding (%) | PAN No. | Contact Number |
|--------|------|------------------|---------|----------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |

15. Details of Designated Person(s)

| No. of Designated Person (1 or 2) | |
|-----------------------------------|--|
| (Document Ref. No. A1) | |

Self-Attested Photograph of 1st Designated Person

C10

Self-Attested Photograph of 2nd Designated Person

C10

| Sr No. | Information | Details of 1st Designated Person | Details of 2nd Designated Person (If Applicable) | Document Ref. No. | |
|--------|---|-------------------------------------|--|----------------------|--|
| (i) | Name | | | A1 | |
| (ii) | Father/Husband Name | | | AI | |
| (iii) | Nationality | | | A2 | |
| (iv) | Date of Birth (DD/MM/YYYY) | | | - C11 | |
| (v) | Gender (M/F/Third Person) | | | CII | |
| (vi) | Highest Education Qualification (Completed) | | | | |
| (vi) a | Name of Qualification/ Degree | | | | |
| (vi) b | Year of Passing | | | C12 | |
| (vi) c | Name of college/Institute | | | | |
| (vi) d | Name of University/Board | | | | |
| (vii) | Correspondence Address | | | C13 | |
| (viii) | District | | | C13 | |
| (ix) | State | | | | |
| (x) | Pin Code | | | | |
| (xi) | Phone No | | | - | |
| (xii) | Email ID | | | - | |

17. Financial Details:

| Sr No. | Financial Year | 2022-23 | 2021-22 | 2020-21 | 2019-20 | 2018-19 | Average | Document Ref. No. |
|------------|---|---------|---------|---------|---------|---------|---------|----------------------|
| | Turnover from relevant business of applicant (In Crore) (Required for Eligibility Purpose) (fill for at least 2 year) | | | | | | | А3 |
| 17.2 | Average Total Turnover from all the business of applicant (In Crore) (Required for Marking purpose) (Fill for at least 2 year) | | | | | | | |
| 17.3 | Net Profit (In Lakhs) (Last 2 year should be Positive) | | | | | | | A3 and C14 |
| 17.4 | Net worth of applicant as on 31.03.2023 | | | | | | | |
| 17.5 | Liquid Assets of applicant as on 31.03.2023 | | | | | | | |
| 17.5. a | Details of Liquid Assets as on 31.03.2023 | | | | | | | |
| (i) | Cash and bank balance | | | | | | | |
| (11) | Deposit with banks, registered | | | | | | | |
| (ii) | & other companies | | | | | | | |
| | Account receivables for sale of | | | | | | | |
| (iii) | goods on credit, notes | | | | | | | C14 |
| | receivables, etc. | | | | | | | |
| (iv) | Interest receivables | | | | | | | |
| (v) | Investments by firm, supported by documentary evidences | | | | | | | |

17.6 Bank Guarantee Details

| 17.6. | Commitment letter from Applicant for Bank Guarantee | | A4 |
|-------|--|--|----|
|-------|--|--|----|

18. Business Experience (PE/PP/PVC):

| Sr No. | Business Experience | Seller/Trader | (DCA/DCA- cum-CS) | Document Ref. No. |
|-----------|--|---------------|----------------------|-----------------------|
| 18.1 | Business Experience as: (Tick Mark) | | | |
| 18.2 | No. of Years of Polymer Handling Experience in last 10 years | | | |
| 18.3 | Mention Financial Years of experience (ex: 2022-23, 2021-22) | | | A5, A6, A7 and C16 |
| 18.4 | Polymers handled in the last 10 years. (Mention name of polymer(s) handled, out of PE/PP/PVC) | | | |
| 18.5 | Geographical area of business (Mention Major Market Names) | | | |
| 18.6 | Copy of the agreement/ appointment letter, if the applicant is/was an authorized channel partner of any polymer manufacturer | | | |

| 18.6 | Annual polymer handling experience (Kilo Tonnes per annum) | 2022-23 | 2021-22 | 2020-21 | Document Ref. No. |
|------|--|---------|---------|---------|-------------------|
| | | | | | A5 |

| 18.7 | Details of different manufacturer where applicant is/was Authorized DCA/DCA-cum-CS/Dealer for PE/PP/PVC. | | | | |
|-------|--|--------------------------|---|-----------------------------|----------------------|
| | Number | Name of the manufacturer | No. of years served as DCA/DCA-cum-CS/ Dealer | Product Handled (PE/PP/PVC) | Document Ref. No. |
| (i) | Manufacturer 1 | | | | |
| (ii) | Manufacturer 2 | | | | C15 |
| (iii) | Manufacturer 3 | | | | |

19. Infrastructure

| Sr No. | Header | Details | Document Ref. No. |
|-----------|--|---------|-------------------|
| 19.1 | Availability of warehouse (Yes/No) | | |
| 19.2 | Warehouse Area (Sq. ft.) | | |
| 19.3 | Type of Ownership (Owned/Leased/Commitment Letter) | | |
| 19.4 | Validity of Ownership (Years) | | C17 |
| 19.5 | Warehouse Address | | |
| 19.6 | Warehouse Phone Number | | - |

| | Office Details | |
|------|---------------------------------|---|
| 19.7 | Availability of office (Yes/No) | - |
| 19.8 | Office Address | |
| 19.9 | Office Phone Number | - |

20. Business Plan Attached (Document Ref. No. C18)

Yes/No

21. Other Business Details

| Sr No. | Header | Details | Document Ref. No. |
|-----------|--|---------|----------------------|
| 21.1 | Year of Establishment | | C3 |
| 21.2 | GST Number of the Applicant (Firm/Company) | | C4 |
| 21.3 | Pan No. of the Applicant (Firm/Company) | | C5 |

22. E-Mandate Attached (Document Ref. No. A8)

Yes/No

| has been concealed therefrom. | |
|---------------------------------|---------------|
| | |
| Signature of Designated Person: | |
| Name: | |
| | |
| Designation: | Company Seal: |
| | |
| Date: | Place: |

I hereby verify what has been stated above is true to the best of my knowledge and correct and nothing material