



Supplier Registration

Full name

Permanent address

Fixed telephone number

NIC number

Mobile number

E-mail

Fax

Name of the business

Address of the business

Telephone number of the business

Fax number of the business

Nature of the business

- Wholesale
 Retail

Shareholders

- yes
 No

If there are shareholders, details about the shareholders

Reasons for applying for sales agent position

- For trade
 For distribution

District in which the business is located

City

Province / District / Area considered for distribution

Specify your distribution facilities for distribution within the relevant region / district

Financial Stability (Enter Bank Information)

Specify whether you currently sell Ayurvedic medicines

Specify information about branch facilities, if any

Expect to pay for drugs

- For cash on hand
 On loan

Expected value of purchase per month in Rs

The value of a bank guarantee

I/We hereby agree to abide by the Terms and Conditions issued by the Sri Lanka Ayurvedic Drugs Corporation and to acknowledge the right of Sri Lanka Ayurvedic Drugs Corporation to revoke the position of Sales Agent in the event of violation of Terms and Conditions.

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