



NEW DISTRIBUTOR REGISTRATION FORM

The purpose of this form is to collect information about distributor that Green Energy Network (**GEN**) may engage to sell or promote 3R Lights products.

A	Business information (must be completed by the owner)							
1.	General Information							
1.1	Name of the person who completed the form							
1.2	Date: (of completion of the form)							
1.3	In what territory and market segment(s) will the distributor interested to operate for 3R Lights?							
1.4	Indicate distributor category and type: (Type: e.g., Distributor, dealer, independent partner, agent, sales consultant, or other ¹ ?)	<input type="checkbox"/> B2C <input type="checkbox"/> B2B <input type="checkbox"/> B2G <input type="checkbox"/> Agents Specific type:						
1.5	Provide a specific description of the 3R Lights products to be sold by the distributor. i.e., High Potential of products in distributor territory.	Products:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> </table>					
1.6	Provide an approx. estimate of the annual turnover the Company will make selling 3R Lights products.							
B	Distributor Information							
2.	Company Information							
2.1	Full legal name of the Company							
2.2	Previous names of the company, if any							
2.3	Official registered address (Street, City, Postal Code, Country, Phone No.)							

2.4	Other principal location(s) of the Company if any	
2.5	Does the Company or its affiliates operate in other countries, and if so, which countries?	
2.6	Does the Company have parents or subsidiaries that have a business relationship with 3R Lights, and if so, which? (if applicable)	
2.7	How is the company organized? (Please check one)	<input type="checkbox"/> Sole owner <input type="checkbox"/> Partnership <input type="checkbox"/> Closely held corporation <input type="checkbox"/> Publicly held corporation <input type="checkbox"/> Other:
2.8	Date the Company was established	
2.9	Year the Company started its current business	
2.10	Website of the Company	
2.11	Number of employees of the Company	
2.12	Local registration number of the Company	
2.13	Local tax registration number of the Company	
3.	Owners Information	
3.1	Identify the principal owner	<p>Name: Position in the company: Date of Birth: Address: Phone number Landline: Mobile number: Email address: Percentage of ownership: Background and other activities:</p> <p>Name: Position in the company: Date of Birth: Address: Phone number Landline: Mobile number: Email address: Percentage of ownership: Background and other activities:</p>

3.2	Please state if any of the above-named people are related to a government official. (If so, explain the nature of the relationship.)	
3.3	Please state if any of the above-named people are employed by the government.	
3.4	Have any of the current owners been barred or suspended from contracting with any government?	

4.	Management Information	
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4.1	Identify key management position holders of the Company such as general, financial, or sales managers.	<p>Name: Position in the company: Residency: Date of Birth: Phone number: Email address:</p> <p>Name: Position in the company: Residency: Date of Birth: Phone number: Email address:</p> <p>Name: Position in the company: Residency: Date of Birth: Phone number: Email address:</p>
4.2	Please state if any of the above-named people are related to a government official. (If so, explain the nature of the relationship.)	
4.3	Please state if any of the above-named people are employed by the government.	
4.4	Have any of the current key management position holders been barred or suspended from contracting with any government?	

5.	Commercial Information	
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5.1	Which other principals or products does the company represent? (if applicable)	<p>Principal: Products: Representation since:</p> <p>Principal: Products: Representation since:</p>
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5.2	Which products does the Company produce locally?	
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6.	Company's Financial Information		
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6.1	Annual turnover (sales) of the Company in the last two years.	Year 2021-22	Year 2022-23
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6.2	What is the Company's banking relations?	Bank name: Address: Account number: IFSC Code: MICR Code: Since:	
		Bank name: Address: Account number: IFSC Code: MICR Code: Since:	

7.	Other Information		
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7.1	Please provide a list of three references at minimum and indicate whether you allow GEN to contact these references in order to determinate whether there were any performance issues or other problems.	References	Allow Contact?
		Reference 1:	Yes/No
		Reference 2:	Yes/No
		Reference 3:	Yes/No

8.	Documents
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provide the Xerox of following documents to support your application.

Sr.No.	Document	Provide		Remark
		Yes	No	
1	GST Certificate			
2	PAN Card – Partners/ Proprietor/ Director/ Company			
3	MSME Certificate			
4	CST /ST No., Excise Registration Number.			
5	Cancel Cheque			
6	Address Proof (Electricity Bill)			
7	Photograph of the Work Place Warehouse.			

I/We, the undersigned, have gone through the terms and conditions, as mentioned here in, for my/our appointment as the distributor of the 3R Lights. I/We understand fully that this registration Form signed in this regard can be used against me/us before any Court of Law/Tribunal/Arbitration proceedings, etc. I/We state that all information as mentioned in this registration Form is true and correct to the best of my/our knowledge and information and I/we shall abide by and maintain the declarations made herein. I/we also agree to be bound by the terms and conditions and policies of supply of goods and after sale services and payment there of conveyed from time to time by the Green Energy Network.

Date :

Place :

Distributor Signature and Stamp

GEN

C) GEN REMARK: