

SL.NO.



THE INDIAN MEDICAL PRACTITIONERS' CO-OPERATIVE PHARMACY & STORES
(Multi State Co-operative Society) **LIMITED, X-185,**
34-37, Kalki Krishnamurthy Salai, Thiruvannamiyur, Chennai 600 041.
E-MAIL ID : impcops@dataone.in WEBSITE : www.impcops.org
Phone : 044 – 24520189,24520244,24521029 FAX : 044 - 24523313

**APPLICATION FOR DISTRIBUTOR FOR DISTRIBUTING IMPCOPS PRODUCTS
FOR THE PERIOD FROM 01.11.2018 TO 31.10.2021**

1. (a) Name of the Proprietor :
(b) If partnership
Partner (1) :
Partner (2) :
Partner (3) :
2. Date of Birth & Age : (1) (2) (3)
3. Gender : Male/Female Male/Female Male/Female
4. S/o, W/o, D/o (1) :
(2) :
(3) :
5. Name & Address of the business place :
6. Communication Address :
7. Permanent Address :

8. i) Phone No. :
- ii) Contact person cell No. :
- iii) E-Mail ID :
9. (*) Whether the shop is Owned/Rental :
- a) If own, enclose documents : Yes/No
- b) If rental : Yes/No
(Rental agreement copy enclosed)
10. (*) GST Number :
(Copy enclosed)
11. (*) PAN Card No. :
(Copy enclosed)
12. Name of the Area for which Place
Distributorship requested. Please (✓)
the correct one : District /Corporation /State/Union Territory
13. Whether the applicant is the existing
Distributor/Stockist for 01.11.2015 to
31.10.2018 (or) before 01.11.2018 : Yes/No
- If yes, state the period :
14. a) Whether the applicant has quit the
Stockistship / Distributorship taken by
him earlier in the middle of the period
in view of its surrender/cancellation /
suspension / termination : Yes/No
- b) If yes cite the reason :

15. Medicines purchased during the period : 2015 :Rs. 2016:Rs.
from 1.11.2015 to 31.10.2018 2017 :Rs. 2018:Rs.

16. State the proposed amount for which : 2018 :Rs.
he/she would purchase medicines during 2019 :Rs.
the period from 01.11.2018 to 31.10.2021 2020 :Rs.
in case he/she was appointed as 2021 :Rs.
Distributor.

17. Any relative working in IMPCOPS : Yes/No; If yes Name:
Relationship:

18. Nominee of the Proprietor :
If partnership (with relationship)

Partner (1)

Partner (2)

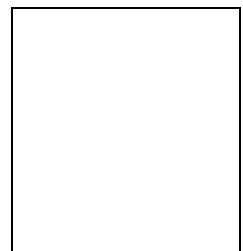
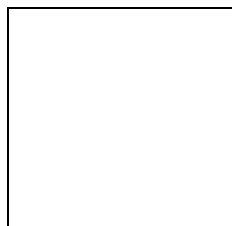
Partner (3)

19. Recent passport size photo of the :
Proprietor

Partner (1)

Partner (2)

Partner (3)



Name:

.....

.....

Place:

Date:

DECLARATION

I/we have gone through the terms and conditions and do agree with the same.
We are ready to take Distributorship for IMPCOPS products.

Further the details furnished above are true and correct to the best of my / our knowledge.

Signature of Proprietor with seal

Partner (1)

Partner (2)

Partner (3)

Note: (*) marked Documents shall be compulsorily enclosed.

IMPCOPS LTD., CHENNAI – 600 041

DS/2018-2019

DATE : 01.11.2018

INFORMATION WITH REGARD TO APPOINTMENT OF DISTRIBUTORS

Distributors are to be appointed for the period from 01.11.2018 to 31.10.2021 for the sales of Impcops medicines. The details of Distributors to be appointed for the District, Corporation and Statewise are given as below.

S. No.	Area of Operation	Security Deposit per Distributor
	TAMILNADU	Rs.
1a	Chennai Corporation (Around 1km from IMPCOPS Head office)	2,50,000/-
1b	Other Chennai Corporation Distributors	1,50,000/-
1c	Corporation areas in Tamilnadu (Madurai, Coimbatore, Trichy, Tirunelveli, Salem & Tiruppur)	1,00,000/-
1d	Other Corporations in Tamilnadu	25,000/-
1e	Other Districts in Tamilnadu	25,000/-
	ANDHRA PRADESH, TELANGANA, KERALA & KARNATAKA	Rs.
2a	Andhra Pradesh, Telangana, Kerala and Karnataka Statewise Distributors	1,50,000/-
2b	Corporation areas in Andhrapradesh, Telangana, Karnataka & Kerala (Per District)	50,000/-
2c	Non-Corporation areas in Andhrapradesh, Telangana, Karnataka & Kerala (Per District)	25,000/-
	PUDUCHERRY	
3	Puducherry	25,000/-
	OTHER STATES STATEWISE DISTRIBUTORS EXCEPT SOUTHERN STATES	
4	Statewise Distributors except Southern States of India (Tamilnadu, AndhraPradesh, Telangana, Karnataka, Kerala & Puducherry)	2,00,000/-
5	Distributors for all the States except Southern States of India (Tamilnadu, Andhra Pradesh, Telangana, Karnataka, Kerala & Puducherry)	4,00,000/- (Additional)
6	Tamilnadu Government supply	2,00,000/- (Additional)

Terms and Conditions:

1. The dealers who are appointed as Distributor shall have to pay the Security Deposit prescribed for that areas and also execute an agreement in the prescribed format in confirming such appointment. They shall pay Rs.500/- by way of DD separately towards documentation charges.
2. Distributors appointed for District/Corporation areas/States can do business within the entire District/Corporation Area/State only. Others can do business only in the area for which they are appointed as Distributor.
3. Security Deposit will carry no interest and it will be refunded to the Distributor only after completion of contract period.
4. The Distributors shall be entitled to a discount of 30% on non-gold items and 20% on gold and allied preparations. They shall in turn, permit a minimum discount of 25% on all the medicines other than gold and allied preparation and 15% on gold and allied preparations to the purchases made by the members of the Society.
5. The supply will be effected to the dealers as per their indents subject to the availability of the stock in the Prepared Medicines Stores at Head Office, Chennai-41 or from the permitted Sales Depot.
6. The supply for the indent will be effected only after the receipt of the payment by way of local a/c payee cheques (or) by D.D (or) NEFT/RTGS.
7. There will be no ceiling amount for the off take of medicines from IMPCOPS for any Distributor during the contract period.
8. The Distributors shall be permitted to purchase the medicines from the IMPCOPS Sales Depots situated in their respective jurisdiction of the concerned Distributor and also from Head Office, Chennai. However if the Sales Depot does not exist within the business area of jurisdiction, the Distributor have to purchase the medicines from Head Office, Chennai and from the nearest Sales Depot as intimated by Office.
9. If the value of the medicines supplied from the Head Office is more than Rs.10,000/-, the Society will bear the transport charges.
10. The dealer shall not sell the products beyond the rates of M.R.P. mentioned on the label of the prepared medicines.

11. The employee who is presently working in IMPCOPS or his/her wife/husband or his/her/blood relatives or the blood relatives of either husband or wife who is an employee of IMPCOPS is not eligible to be the sellers or distributing agents of any of IMPCOPS medicines either independently or in partnership with any of the outsider of IMPCOPS on commercial basis.
12. The Management has the power to increase/decrease the number of Distributors for any area at any time within the Distributorship period.
13. The Management of IMPCOPS reserves the rights to select or reject the applications.
14. In case of any dispute of any nature committed by the dealers such dispute shall be referred to the Court or other legal forums within the city of Chennai for adjudication.

SECRETARY

Note :- Application form can also be downloaded from our website www.impcops.org. On submission of filled in application with relevant documents along with Rs. 250/- as fee per application form by way of Demand draft in favor of 'THE SECRETARY,IMPCOPS LTD.' payable at CHENNAI. The applications received without fee will be rejected.

Applications can be had from our head office by paying Rs.250/- by way of cash or demand draft drawn in favor of "The Secretary, IMPCOPS Ltd.," payable at Chennai.