



Niyya Food & Drinks Company Limited

■ Farm Pride Juice ■ Farm Pride Yoghurt

TL 3, Nnamdi Azikiwe Expressway, Badikko New Extension, Kaduna, NIGERIA.
Tel: +234(0)7018185009 Email: customercare@niyyagroup.com Website: www.niyyagroup.com

Passport Photograph of the Proprietor of the business

DISTRIBUTORSHIP APPLICATION (KYC) FORM

SERIAL NO:

ISSUED DATE:

1. DETAILS OF DISTRIBUTOR:

- 1.1 Name of Business:
- 1.2 Address of Business:
- 1.3 City: State: Country:
- 1.4 Telephone No: Email:
- 1.5 Business Registration/Incorporation No:
- 1.6 Type of Business (Wholesale Distributor or Retail Supermarket)
- 1.7 Business Interest: Farm Pride Juice Farm Pride Yoghurt General Business
- 1.8 Area of Business Coverage: Markets Served:

2. BUSINESS OPERATIONS DETAILS:

- 2.1 How long have you been in operations: No of Branches (if any):
- 2.2 How long have you been in food products distribution business?
- 2.3 What is your monthly turnover in Naira?
- 2.4 How much are you ready to invest in business with us?
- 2.5 Do you have owned shops for your sale? If yes, which location(s)?
- 2.6 How do you intend to collect our products? Self-pick up 3rd Party Delivery
- 2.7 How do you intend to pay for our products before collection /delivery (NO CREDIT SALES)?
Cash Cheque Online bank transfer
- 2.8 What is your intended payment timeline? Advance Immediate Others

(Please specify)

3. DISTRIBUTOR'S AUTHORISED REPRESENTATIVES/CONTACT PERSONS:

3.1 Representative/Contact Person 1:

Full Name:

Telephone No:

Email:

Signature:

3.2 Representative/Contact Person 2

Full Name:

Telephone No:

Email:

Signature:



Niyya Food & Drinks Company Limited

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4. DISTRIBUTOR'S BANKING DETAILS:

- 4.1 Account Name:Name of Bank:
- 4.2 Account No: How long have you been operating this account?
- 4.3 Do you enjoy credit facilities from this bank? (**Note:** We may request for a bank reference)

5. REFERENCES:

Give us details of two references we can contact for information about you.

5.1 Reference 1

Full Name:

Address:

Telephone No: Email:

Relationship with you:

5.2 Reference 2

Full Name:

Address:

Telephone No: Email:

Relationship with you:

6. REQUIRED DOCUMENTS TO BE SUBMITTED ALONG WITH THIS FORM:

6.1 Individual Documents

- (a) Passport Photo of the Business Owner and Representatives 1 & 2
- (b) Government recognised ID of the Business Owner and Representatives 1 & 2 (i.e. Driver's License, National ID, International Passport)

6.2 Corporate Documents

- (a) Certificate of Business Incorporation.
- (b) Articles & Memorandum of Association
- (c) Tax Registration Certificate

7. CERTIFICATION BY DISTRIBUTOR:

I, Full Name of the Head of the Business hereby certify that the above information is true and that we will abide by the terms and conditions of distributorship in Niyya Food & Drinks Co. Ltd.

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Designation Signature Date

7. FOR NIYYA FOOD & DRINKS CO. LTD's USE ONLY:

Comment/Authorisation by National Sales Manager:

Signature: Date:

Comment by Accounts Manager:

Signature: Date:

Comment by Financial Controller/ Chief Executive (Approved/Not Approved):

Signature: Date: