Red Labs Distributor Application Form

Personal Details

Full Name: _____

Mobile Number: _____

Alternate Number: _____

Email Address: _____

Business Details

Firm/Company Name: _____

GST Number: _____

Drug License Number: _____

Firm Type (Proprietorship / Partnership / Pvt Ltd / Other): _____

Years of Experience in Pharma Distribution: _____

Address Details

Complete Business Address:

_____

City: _____ State: _____ Pincode: _____

Coverage Area

Which area(s) or district(s) do you want to cover? _____

Infrastructure & Facilities

Do you have a godown/warehouse? (Yes / No): _____

Approx. Size of Storage Space: _____

Do you have delivery team/logistics? (Yes / No): _____

Current Distribution

Are you currently distributing any other pharma brands? (Yes / No): _____

If yes, please list them: _____

Monthly Sales Volume (approx): _____

Why do you want to join Red Labs?

_____
____

Investment Interest

Are you ready to invest in stock and distribution setup? (Yes / No): _____

Upload Documents

Attach the following documents:

- GST Certificate
- Drug License
- Aadhaar or PAN Card

Declaration

I hereby declare that all the information provided above is true and correct.

Signature: _____ Date: _____