**DEALER APPLICATION FORM**

Please fill below:

**SECTION A: Qualification Information**

|  |  |  |
| --- | --- | --- |
| **No.** | **Requirement** | **Dealer's Information (To Be Filled In)** |
| 1. | Company Name |  |
| 2. | Trading Name (if different) |  |
| 3. | Physical Address (Main Office) |  |
| 4. | Contact Person |  |
| 5. | Phone |  |
| 6. | E-Mail |  |

**SECTION B: Capacity Assessment**

**Additional Company Details**

|  |  |  |
| --- | --- | --- |
| **No.** | **Requirement** | **Dealer's Information** |
| 1. | Number of Permanent Staff |  |
| 2. | Number of Sales Staff |  |
| 3. | Number of Shops/Stores in Operation |  |
| 4 | Number of Vehicles Owned/Leased (type & capacity) |  |

Physical Stores/Branches (List per County):

|  |  |  |  |
| --- | --- | --- | --- |
| **County** | **Number of Shops/Stores** | **Available (Yes ☐ / No ☐)** | **Shop/Store Location** |
| Nairobi |  | Yes ☐ / No ☐ |  |
| Mombasa |  | Yes ☐ / No ☐ |  |
| Kiambu |  | Yes ☐ / No ☐ |  |
| Kisumu |  | Yes ☐ / No ☐ |  |
| Eldoret |  | Yes ☐ / No ☐ |  |
| Machakos |  | Yes ☐ / No ☐ |  |
| Meru |  | Yes ☐ / No ☐ |  |
| Nakuru |  | Yes ☐ / No ☐ |  |
| Nyeri |  | Yes ☐ / No ☐ |  |
| Kisii |  | Yes ☐ / No ☐ |  |
| Others (Specify) |  | Yes ☐ / No ☐ |  |

**SECTION C: Experience**

1. Briefly describe your sales/distribution experience in the last three years

|  |
| --- |
|  |

2. Average Annual Sales Revenue (Latest 2 Years):

|  |  |
| --- | --- |
| **Year** | **Sales Revenue (KES)** |
|   |   |
|  |  |

3. Client/Customer References (within the last three years):

|  |  |  |
| --- | --- | --- |
| **Name** | **Phone** | **Organization** |
|   |   |   |
|   |   |   |
|  |  |  |
|  |  |  |

**SECTION D: Product Interest**

Please tick the electrical products you are interested in distributing:

|  |  |
| --- | --- |
| **Product** | **Interested (Yes ☐ / No ☐)** |
| Distribution Transformer | Yes ☐ / No ☐ |
| Electricity Meters | Yes ☐ / No ☐ |
| Other (specify): |  |

**Declaration:**
I certify that the information provided is true and complete.

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**\_\_\_\_\_\_\_\_\_\_\_\_

**ATTACHMENTS (For Applicants to Attach)**

Please attach the following documents:

1. Business Registration Certificate
2. Unified Business Permit
3. Incorporation Certificate
4. Financial Statement
5. KRA PIN Certificate
6. Tax Compliance Certificate
7. Client Recommendation Letters (at least 4)
8. Audited Account Statements (Latest two years)
9. Bank statement (for individuals, Latest 12 months).
10. Company Profile (optional)