RC NO.: 7430569
NASAS BEVERAGES LIMITED
nasasbeverages.site nasasbeveragenigerialimited@gmail.com
WAREHOUSE/SALE OUTLET:
300 Wharf Road, Apapa, Lagos.
07049112045
09166628118

DISTRIBUTOR'S FORM

📌 **Attach Passport Photograph Here**

APPLICANT DETAILS

- **Full Name:** _____
- **Business Name (if any):** _____
- **Business Address:** _____
- **Phone Number:** _____
- **Email Address:** _____
- **State & Local Government Area:** _____
- **Nationality:** _____
- **Business Registration Number (if applicable):** _____

BUSINESS INFORMATION

- **Do you have an existing business?** ☐ Yes ☐ No
- **Nature of Business:** ☐ Wholesale ☐ Retail ☐ Others: _____
- **Years of Experience in Beverage Distribution:** ____
- **Do you currently distribute other brands?** ☐ Yes ☐ No
  - If yes, please list: _____
- **Estimated Monthly Sales (in cartons):** _____
- **Storage Facility Available?** ☐ Yes ☐ No
- **Distribution Coverage Area:** _____

BANK DETAILS *(For Commission & Payment)*

- **Account Name:** _____
- **Bank Name:** _____
- **Account Number:** _____

REFERENCES *(Provide two references who can vouch for your business)*

1. **Name: _____ Phone: _____ Relationship: _____**
2. **Name: _____ Phone: _____ Relationship: _____**

IMPORTANT TERMS & CONDITIONS

1. **Initial Purchases:** All new distributors must buy directly from the warehouse with their own money. No goods will be given on credit at the start.
2. **Purchase Trust & Patronage:** To qualify for future credit purchases, distributors must establish a good **purchase history and consistent sales over time**.
3. **Minimum Sales Volume:** The company may set a required monthly purchase target to assess distributor performance.
4. **Resale Prices:** Distributors must adhere to the company's pricing structure to ensure market consistency.
5. **Termination:** Failure to meet agreed conditions may result in withdrawal of distributorship rights.

DECLARATION

I, **_____**, hereby apply to become an authorized distributor of **Nasas Beverages Limited**. I confirm that I understand and accept the terms that **all purchases must be paid for upfront** until I establish trust and sales consistency.

Applicant's Signature: _____
Date: _____

FOR OFFICIAL USE ONLY

(To be filled by Nasas Beverages Limited)

- **Application Approved?** ☐ Yes ☐ No
- **Approval Date: _____**
- **Approved By: _____**
- **Designation: _____**
- **Signature: _____**