



Distributor / Reseller / Sales Agent Application Form

All the interested agents/distributors are requested to send their details by filling the Agent/Distributors Application form below. And agents are required to fill, stamp and sign in the specified fields, then send back to contact@oreganocares.com

Agents Business Details	
Business Name:	
Nature of Business <input type="checkbox"/> Limited Company <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietor <input type="checkbox"/> Other	
Address:	
Phone Number:	Fax Number:
Website:	E-mail:

Contact Person details
Name:
Phone Number:
Email:
Position:

How long have you been in this business

Name the regional areas / cities which you can cover	
1	4
2	5
3	6

Other offices and branches (list the locations, if any)	
1	5
2	6
3	7
4	8

What we require:

Together with the full commitment to Responsible Care principles, we look for adequate geographical coverage and sufficient market penetration.

Distributor / Reseller / Sales Agent Definition:

- Clearly understands and promotes the concept of solutions offered by Oregano Cares's organic products.
- Proactively markets and sells the Oregano Cares's organic products.
- Meets mutually agreed upon, reasonable annual quotation and sales targets.
- Actively promotes the Oregano Cares's organic products and supports the sales and marketing objectives of the company.
- Adheres to Oregano Cares's credit and privacy policies.

Oregano Cares reserves all rights to terminate the agency contract if the agent incapable to meet the targets and commitments within the definite period agreed. Should the Distributor / Reseller / Sales Agent relationship be terminated, there will be a 30-day grace period to close all pending projects and business in progress. In house acknowledged order will be honoured regardless of when shipment is made.

Please attach copies of Commercial License, Chamber of Commerce Registration, Articles of Association, Personal Identification proof with photograph, Authorised Signatory, Other documents if Any.

We apply for:

Sales Agent / Reseller / Distributor

I have read, understood and accept the above Terms and Conditions.

Signed for and on behalf of the Company by:

Signature:

Name:

Position:

Date:

Stamp: