



2ND FLOOR, BLOCK B, POSTA APARTMENTS
RING ROAD, WESTLANDS
P.O. BOX 25565 - 00100
Tel: +254 20 80 22 746/8
NAIROBI, KENYA.

APPLICATION FOR DEALERSHIP FORM

This is a dealership application form only and by completing it Impakt distributors do not convey any special benefits to the applicant whatsoever

Name of Company (Company registered Name):

Trading as: TAX NO:.....

Physical Address:

P. O. Box:Code..... City:Country.....

Telephone Number: Fax Number:

Customer's Contacts:

Admin Department / Managing Director / Sales Manager

Contact Person:

Direct office Tel: Mobile Tel:

Email address:

Procurement Department:

Contact Person:

Direct office Tel: Mobile Tel:

Email address:

Payment Option, Please tick where appropriate.

Cash Telegraphic Transfer Cheque on delivery:

Please note that in the process of receiving payment any consequential bank charges will be borne by the customer.

Bank Details:

Bank Name: Branch:

Bank Account Number: Please attach a cancelled cheque.

How did you know about Impakt Distributors East Africa:

Referred by someone Internet Search Others Please specify

Please provide at least two trade references;

Company Name: Company Name:

Address:.....Address:.....

Contact name:.....Contact name:

Telephone No.....Telephone No.....

By completing this dealership form, I/We and company/organization agree to all terms and conditions guiding this credit facility.

Name:Name:

Sales Manager: Finance Officer / Accountant.....

Signature:Signature:

Date:.....Date:.....

Please affix Company Stamp.

For Impakt Distributors East Africa Ltd office use Only

Assigned Customer Representative:

Assigning Officer:

Communication sent to the customer: YES Mode of Communication Email Telephone Letter Personal Visit