



ACO NIGERIA

Suite 1, FTY Recreation Center Guards Polo Club, Asokoro Abuja
TEL: +234 703 875 5933, +234 906 908 6389 Email: info@aconigeria.com

Dealer/Distributor Form

I. Basic Information: -

1. Name of the company _____

2. Name of authorized representative _____

3. Company Address: - _____

Town: _____ City: _____ State: _____

Phone No. _____ Mobile No. _____

Fax No. _____

E-mail: _____

Website: _____

II. Constitution of Dealer/Distributor

1. Proprietary / Partnership / Pvt. Ltd. / Other **(Please specify)**

III. Banking Reference

1. Name and address of bank:

2. Account Number: _____

3. Bank Phone Number: _____

IV. BVN (Banking Verification Number)

Name: _____

BVN Number: _____

V. Documents Provided:

1. FILLED APPLICATION FORM (ADEQUATE INFORMATION MUST BE SUPPLIED) ☐
2. TWO PASSPORT PHOTOGRAPH OF THE PRINCIPAL OR DIRECTOR ☐
3. PHOTOCOPIES OF CAC FORM C07 AND C02. ☐
4. PHOTOCOPY OF CERTIFICATE OF REGISTRATION/INCORPORATION ☐
5. BANKERS REFERENCE LETTER ADDRESSED TO ACO NIGERIA ☐
6. PHOTOCOPIES OF EVIDENCE OF OWNERSHIP OF WAREHOUSE/STORE/ SHOWROOM/OFFICE ☐
7. PHOTOCOPY OF UTILITY BILL, ELECTRICITY BILLOR WATER RATE BILL ☐
8. PHOTOCOPY OF NIN (NATIONAL IDENTIFICATION NUMBER) ☐

- I understand that I am to pay **ACO NIGERIA** only through the below mediums only.

1. Transfer
Bank: Zenith Bank
Account number: 1229090272
Account name: Africa Consulting Office Energy Solutions Ltd.
2. Cash in company office with a company receipt.
3. POS in company office with a receipt.

ACO NIGERIA is not responsible for any payment done through other channels nor to goods given to our marketing/sales staff.

Customer Name

Signature:

Date:

**Filled applications and supporting documents should be forwarded to info@aconigeria.com
Email size not more than 10MB.**