



DISTRIBUTOR APPLICATION FORM

In order to be able to process your application, please take a moment to complete the following form. Fields with an asterisk (*) are required. The more information you can provide, the better we can assess your company and our mutual chance of success. Thank you.

- COMPANY*:
- ADDRESS*:
- CITY*:
- STATE:
- COUNTRY*:
- ZIP/POSTAL CODE:
- MAIN OFFICER and TITLE:
- SALES MANAGER:
- DATE:
- TELEPHONE*:
- FAX*:
- E-MAIL*:
- WEB:
- YEAR ESTABLISHED:
- APPROXIMATE YEARLY TURNOVER:

COMPANY PROFILE

- 1. What is your main line of business?
 - QC Metallurgical Test Equipment
 - Plastics Test Equipment
 - Metrology
 - Machine Tools
 - Laboratory supplies
 - General Sales
 - Other (specify):

2. Is your organization structured for?

- Sales
- Service/Calibration

3. If sales, how many product lines do you represent?

4. Which are the main companies you represent?*(list the 6 biggest in order of importance and indicate their percentage of your business).

<u>COMPANY NAME</u>	<u>PERCENTAGE</u>

5. Does your company have a service department?

- Yes
- No

6. If not, how would you provide service to your customers?*

7. Is your service department ISO certified, or certified with the corresponding local authority?

- Yes
- No

8. If yes, which authority?

9. How many employees work in your company?*

10. How many employees are in your sales department?*

11. How many in your service department?

12. Does your company have the infrastructure to sell and import products into your country?*

- Yes
- No

13. If not, how would you intend to market the products?*

14. Do you sell to both the private or public sector? What percentage to each?

	<u>Yes/No</u>	<u>Percentage</u>
Public		
Private		

15. Which territories do you cover?

16. Do you have any sales and service branch offices? If so, How many and where?

17. Please indicate any prior experiences you have had in working with Universal Testing Machines.

PRODUCT INFORMATION

1. List the active companies in your local UTM (Universal Testing Machine) market, and your assessment of their market shares.

<u>COMPANY NAME</u>	<u>PERCENTAGE</u>

2. In your local UTM market, indicate your estimated percentage of locally manufactured product against the imported similar.

	<u>Percentage</u>
Local UTM products	
Imported UTM products	

3. How do you rate the quality of the local products versus the imported equivalents?

- Worse
- Equal
- Better

4. Are you currently selling a line of Rockwell hardness testers?

- Yes
- No

5. If yes, what brands?

6. If not, are you interested in selling our TRU-BLUE II Rockwell testers?

- Yes
- No

MARKETING INFORMATION

1. Please list the promotional activities in which you currently participate or plan to participate in.

<u>Type of Activity</u> (Advertising/Tradeshaw/Mass mailing)	<u>Name</u>

2. Do you feel that demonstration equipment is necessary in your country?

- Yes
- No

Please explain your answer:

3. Is your company willing to invest in demonstration equipment?*

- Yes
- No

4. Is your company willing to send someone abroad for factory training?*

- Yes
- No

5. Do you feel that a non-exclusive relationship would be an appropriate way to provide wider market and territorial coverage?

Yes

No

Please explain your answer:

6. Please provide an estimated sales forecast for the first two years of activities.

First year US \$

Second year US \$

7. What would be your strategy to succeed with UNITED in your country?

8. What do you expect from UNITED in order to achieve success in your UTM market?

9. Write any additional comments or observations you may have.