

Dealer Application Form

Company Details:													
Company Name													
Date of Establishment						Type of Organization							
Business license No.						VAT No.							
Website					E-mail Address								
Telephone No.						Fax No.							
Company Address													
						•		Z	ip Code				
	Directors/ Managers				Human Resource								
Number of Employees	Sales & Marketing				Purchasing								
	Engineers				Logistics								
	Quality Control					Others							
Office Area	m ² Wareh			use Are	а	m²							
Active Trade Refere	nces: "please list the top	o brands	s which yo	u've beel	n dealing	with"							
Brand Name	How long have you been M with this brand?		Main Products		Relevant Territories		; <i>L</i>	Distributorship []		[plea	se tick $$]		
					or Industries		E	Exclusive N		Non-Ex	Non-Exclusive		
1)													
2)													
3)													
4)													
Sales Performance:													
Total Sales	Year N-1			Currer	nt Year N	Ye			ear N+1 (forecasted)				
	\$			\$		\$		\$					
Percentage of Sales	In Semiconductor	In Alt	In Alternative		In Oil &	& Gas	In Power Plant		In Petr	ochen	nical	Others	
	%				9		%		%		%	%	
Territory and Partic	ular Industry: "please	e state v	which regio	on/countr	y and par	ticular indu	stry you are a	pplying	for"				
Region / Country						Particular Industry							
1)						1)							
2)						2)							
Your target turnove	r for FITOK product	ts:											
First 6 months	\$												
First 12 months	\$												

Contact Persons:							
Main Contact Person	Alternative Contact Person						
Full Name	Full Name						
Title	Title						
E-mail Address	E-mail Address						
Telephone No.	Telephone No.						

I hereby certify that all the information provided by me in this application is correct to the best of my knowledge and I authorize **FITOK Group** to investigate and verify the information I have provided herein.