



Dear Madam/Sir,

We ask you for a few minutes of your time to fill out the attached questionnaire. The information you are going to supply will allow us to better understand your company and the market you are operating in, as well as to enable us to evaluate your suitability as a Wise Power distributor. We thank you in advance for your cooperation.

## NEW DISTRIBUTOR QUESTIONNAIRE

### GENERAL INFORMATION

<b>1</b>	<b>COUNTRY</b> _____
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<b>2</b>	<b>COMPANY NAME</b> _____
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<b>3</b>	<b>FOUNDATION YEAR</b> _____
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<b>4</b>	<b>OWNERSHIP</b> _____
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<b>5</b>	<b>CENTRAL OFFICE ADDRESS</b>	_____
	STREET	_____ _____
	CITY	_____
	ZIP CODE	_____
	CORP. PHONE #	_____
	CORP. FAX #	_____
	WEB ADDRESS / E-MAIL	_____

<b>6</b>	<b>OTHER REGIONAL OFFICES OR SERVICE CENTERS</b> _____ _____ _____
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<b>7</b>	<b>BANKING REFERENCES</b>
	_____
	_____

**ORGANIZATION ( ATTACH COMPANY PROFILE )**

<b>8</b>	<b>ORG. CHART</b>
	_____
	_____
	_____

<b>9</b>	<b>NUMBER OF EMPLOYEES</b>
	_____

<b>10</b>	<b>HOW MANY SALES REPS DOES YOUR COMPANY EMPLOY? (DIRECT OR THROUGH SUB-DISTRIBUTORS)</b>
	_____

<b>11</b>	<b>HOW MANY SERVICE ENGINEERS DOES YOUR COMPANY EMPLOY? SUPPLY DETAILS OF THE SERVICE SUPPORT YOUR COMPANY CAN PROVIDE?</b>
	_____

**MARKET OVERVIEW**

<b>12</b>	<b>MARKET SEGMENT SIZE AND YOUR POSITION IN THE MARKET SEGMENT.</b>
	_____
	_____

<b>13</b>	<b>WHAT MANUFACTURERS DO YOU CURRENTLY CARRY ON AN EXCLUSIVE BASIS?</b>
	_____



14	<b>WHAT MANUFACTURERS DO YOU CURRENTLY CARRY ON A NON EXCLUSIVE BASIS?</b>
	_____
	_____

15	<b>WHAT ARE YOUR COMPANY TOTAL SALES IN US\$/EURO FOR THE LAST THREE YEARS?</b>
	_____
	_____

16	<b>DESCRIPTION OF YOUR MARKETING ACTIVITIES</b>
	_____
	_____
	_____
	_____
	_____
	_____

17	<b>ANALYSIS OF COMPETITION IN YOUR MARKET (TOTAL SALES BY COMPETITORS, MARKET SHARE, YOUR PURCHASE TARGET FOR THE NEXT THREE YEARS)</b>
	_____
	_____
	_____
	_____
	_____
	_____



## **SERVICE / SUPPORT**

**PROVIDE FULL DETAILS OF YOUR SERVICE AND TECHNICAL SUPPORT CAPABILITIES?**

**PLEASE BE AS SPECIFIC AS POSSIBLE AND INCLUDE THE FOLLOWING INFORMATION:**

NO. OF SERVICE ENGINEERS:

ARE THESE YOUR DIRECT EMPLOYEES:

IF NOT, DO YOU SUB-CONTRACT TO A LOCAL SERVICE COMPANY:

IF NOT, INDICATE HOW YOU PLAN TO PROVIDE SERVICE SUPPORT:

HAVE YOUR ENGINEERS BEEN TRAINED IN REFRIGERATION:

IF YES, PLEASE PROVIDE DETAILS:

WHERE ARE THE ENGINEERS LOCATED:

ARE YOU WILLING TO CARRY A FREEZER SPARE PARTS STOCK:

ANY OTHER RELEVANT INFORMATION: