

**NEW  
APPLICATION**



**DISTRIBUTOR  
FORM**

**DISTRIBUTOR INFORMATION**

**DISTRIBUTOR NAME:**

**DATE:**

**ADDRESS:**

**CITY:**

**STATE/PROVINCE:**

**POST CODE:**

**COUNTRY:**

**PHONE:**

**FAX:**

**EMAIL:**

**COMPANY WEB ADDRESS:**

**PRINCIPAL CONTACT AND TITLE:**

**PRINCIPAL CONTACT'S EMAIL:**

**NUMBER OF SALESPEOPLE:**

**PURCHASING CONTACT:**

**REFERENCES AND BANKING INFORMATION**

**PLEASE PROVIDE THREE TRADE REFERENCES:**

- 1.
- 2.
- 3.

**YOU WILL BE ENTERED INTO A PREPAYMENT PLAN. ONCE A HISTORY HAS BEEN ESTABLISHED, BMC EXTREME CUSTOMS INC. WILL DETERMINE WHETHER TO OPEN A CREDIT ACCOUNT. BMC EXTREME CUSTOMS INC. DOES NOT GUARANTEE EVERY COMPANY WILL HAVE THE OPPORTUNITY TO ENTER INTO A REVOLVING CREDIT ACCOUNT.**

**DISTRIBUTION SERVICE**

**NUMBER OF YEARS IN BUSINESS:**  
**NUMBER OF SALES EMPLOYEES:**  
**ANNUAL REVENUE (SPECIFY CURRENCY):**  
**TERRITORY:**

**PLEASE STATE HOW YOU PLAN TO MARKET AND PROMOTE BMC  
EXTREME CUSTOMS INC:**

**PLEASE LIST THE TRADE SHOWS YOUR COMPANY ATTENDS EACH YEAR:**

**HOW MANY BMC EXTREME CUSTOMS UNITS DO YOU EXPECT TO SELL IN  
THE NEXT TWELVE MONTHS?**

**FOR BMC EXTREME CUSTOMS INTERNAL USE**

**BMC EXTREME CUSTOMS Limited representative:**

**Target Markets:**

**Type of Distributor (general/specific market):**

**What other similar products does the distributor sell?**

**Specify Territory the distributor will sell in:**