

DAQ (Form1)

DISTRIBUTOR QUALIFICATION QUESTIONNAIRE

Please fill out the following information.

Applicant/Distributor's name:

Company regions:

CEO/President:

Sales Manager:

Marketing Manager:

Address:

City:

Country:

Post code:

Phone/Fax:

E-mail & Website:

Capital structure: sole trader Partnership Corporation Public Private other
[please specify]

1. Please indicate last year's revenue in AUD, USD, RM or other currencies:
2. When was your company established?
3. Please list the number and locations of any warehouses, offices, and any other premises that operate off-site within your company.

4. Please indicate the sales volume percentage you service in each of these market segments:

Market Percentage of your sales:

Hair Salons%:

Beauty Salons%:

Hair care Centres%:

Beauty trading Companies%:

Other % [please specify]:

5. What percentage of your organisation's total time is spent in each of the following categories?

Field sales calls __%, Administration __%, Telemarketing __%,

Other [please specify] _____ %

6. Indicate the number of direct full-time employees in your business, in each of the following categories:

Sales __, Marketing __, Administration __, Customer Service __, Service Engineers __, Application Specialists __

Total:

7. Do you work with, or through other channels of distribution such as sub-distributors, wholesalers or independent representatives: () Yes () No

If yes please describe and what percentage of your business is done through these channels%

8. From what sources do you receive your sales leads? (Please circle)

Advertising % ..., Trade shows %..., Self-generated %...; Telemarketing %...
Consultant's % ...; Suppliers %...; Manufacturers %...

Other % ... [please specify]:

9. What is your industry background, what products or services are you familiar marketing?

10. What are the three most important exhibitions or trade shows that you attend?

Indicate the date of the next upcoming one for each:

Exhibition - Date:

Exhibition - Date:

Exhibition - Date:

11. Are you a leader on the market for any of your products or services?

12. How do you keep your staff updated on sales techniques and training?

13. Do you have your own facilities with specialised equipment on site? YES NO
If yes, please specify:

14. Does your business hold any specific registrations, licenses or permits in relation to your region and/or industries rules and regulations? YES NO

15. How do you handle regulatory issues?

16. Are you familiar with selling premium products? YES NO
If yes, please list the title of each of the premium products that you currently stock.

17. Please indicate the main products and product categories and their relative sales importance:

Product category- Manufacturer/Supplier % of total sales

_____ %

_____ %

_____ %

_____ %

18. Give an example of a system you have in place to help facilitate the communication between key syndicates within your company.

19. What is the market potential of your regional area?

- What is the expected market growth?
- Are there other industries where you see an opportunity for our product lines?

20. Please provide your best estimate for sales forecast for our products.

Ungex product units:

Year 1=

Year 2=

Year 3=

21. What specifically can your brand offer Ungex that other brands can't?

Total Purchases in AUD, USD, MYR or ...:

22. Any other important aspects or suggestions that you would like to make?

Thank you for your application, all information will be handled confidentially.