

14 February 2017

To: Potential Distributors

Re: Distributor Evaluation

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Dear Sir/Madam,

For Helios Power Solutions to supply your company with our products, we would appreciate if you could let us have some further information in regards to your company for preparation of a distribution evaluation.

Please complete this form as fully and clearly as possible, and attach any other information (company reports, brochures etc) that may assist us in supporting your company. Please return this form via fax or email to us at the address below.

1. YOUR COMPANY NAME :

ADDRESS :

Street (for shipping) :

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Postal (for billing) :

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Telephone :

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Webpage :

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Other Offices address :

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2. PERSONNEL

CEO:

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Title:

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Marketing:

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Title : \_\_\_\_\_

Sales : \_\_\_\_\_

Title : \_\_\_\_\_

Purchasing : \_\_\_\_\_

Title : \_\_\_\_\_

Number of sales representatives : \_\_\_\_\_

Number of technical support staff : \_\_\_\_\_

Total number of employees : \_\_\_\_\_

**3. COMPANY**

How many years has the company been operating? \_\_\_\_\_

What manufacturers and products account for 80% of your business? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List major lines previously carried but discontinued, and reason(s) for discontinuing

\_\_\_\_\_  
\_\_\_\_\_

Do you manufacture any Power Electronic Products? \_\_\_\_\_

If so, please describe : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**3. COMPANY (continued) :**

Do you have warehousing and stock ing facilities? Yes / No

Please give a brief explanation of your marketing methods : \_\_\_\_\_

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List major exhibitions / meetings attended and the month each occurs : \_\_\_\_\_

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#### 4. FINANCIAL

Bank : \_\_\_\_\_

Bank address : \_\_\_\_\_

Revenue currency : \_\_\_\_\_

Revenue last year : \_\_\_\_\_

Revenue estimate this year : \_\_\_\_\_

#### 5. MARKET

Country / area covered \_\_\_\_\_

Markets covered e.g. Telecommunications, Radio, Military, and Industrial : \_\_\_\_\_

\_\_\_\_\_

What is your assessment of the market for Helios Power Solutions product in the next 12 months?

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6. REGULATORY

Is registration of products mandatory in your country? \_\_\_\_\_

Time needed to register : \_\_\_\_\_

List all approvals required / demanded by your market : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What are the procedures needed to ensure proper registration / approval? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Staff member name responsible for approvals? : \_\_\_\_\_

7. ADDITIONAL DATA :

Preferred freight forwarder : \_\_\_\_\_

Preferred shipping method : \_\_\_\_\_

Partial Shipment allowed : \_\_\_\_\_

Customs agent details : \_\_\_\_\_

Please provide any other information that may assist us to service your company's requirements: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This statement does not oblige yourselves or Helios Power Solutions. to accept or award distributor rights based upon the information submitted herein or attached. Any such information submitted will be held in confidence, so long as it is or has not become disclosed to the public, or known to Helios Power Solutions from a separate source.

Terms of payment for the initial 12 months is by Telegraphic Transfer prior to dispatch.

Should you have any queries regarding this questionnaire please do not hesitate to contact us at your first opportunity. Assuring you of the best of our attention at all times and we look forward to being of service to your company in the near future.

Signed : \_\_\_\_\_  
By Name : \_\_\_\_\_  
Title : \_\_\_\_\_  
Date : \_\_\_\_\_