



INTERNATIONAL DISTRIBUTOR PROSPECT FORM

Company Background		
Company Name:		
Mailing Address:	Contact:	
	Title:	
	Phone:	
	Fax:	
E-Mail Address:		
Web Site: http://		
Business Activity		
Which of the following best describes the identity of your company?		
<input type="checkbox"/> Full stocking distributor	<input type="checkbox"/> Wholesaler	<input type="checkbox"/> Authorized Vendor
<input type="checkbox"/> Distributor	<input type="checkbox"/> Retailer	<input type="checkbox"/> Other, explain
Corporate Structure		
Is the company privately or publicly held?	<input checked="" type="checkbox"/> Private	<input type="checkbox"/> Public
How many years has the company been in business?		
In which countries do you do business?		
How many employees in the company?		
How many sales representatives in the company?	Inside:	Outside:
Is there a warehouse facility to stock product?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there a showroom or product display area?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What are the company's annual sales in U.S. dollars?		



Principal Markets Served

List the percentage/concentration of effort for each of the following markets:

Table with 2 columns: Market Category, Percentage/Concentration. Rows include Industrial Process Piping, Plastic Piping, Water Distribution, Fire Sprinkler, Gas Distribution, Professional Plumbers/Pipefitters.

Principal Accounts Handled

Please list some of your best customers. Include company name, country located, and number of years doing business together for each of the following categories. (All information will be kept strictly confidential, and Structured Group will not contact any companies.)

End Users

Table with 3 columns: Company Name, Country, Years. Multiple empty rows for data entry.

Wholesale Companies

Table with 3 columns: Company Name, Country, Years. Multiple empty rows for data entry.

Retail Companies

Table with 3 columns: Company Name, Country, Years. Multiple empty rows for data entry.

Additional Information

Please share details on anything that makes your company outstanding. Also, briefly explain why your company would be a good fit with Structured. (Optional)



Financial Information	
Bank name:	Bank Contact:
Bank Address:	
Bank Phone:	Bank Fax:
Trade References	
Company Name:	Contact:
Address:	Email Address:
Company Name:	Contact:
Address:	Email Address:
Company Name:	Contact:
Address:	Email Address:

email form to: ademola@structuredresource.com

Thank you for your interest in Structured Resource Business Limited.

Structured Resource Business Limited

13, Alhaji Bashorun Street, Off Norman Williams,
Ikoyi 101233, Lagos, Nigeria

Approved _____

Date _____

Cust # _____