

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 an Oil Spill Tracking Buoy (OSTB) distributor

We thank you in advance for your cooperation.

## NEW DISTRIBUTOR QUESTIONNAIRE

### WE ARE SEEKING

Exclusivity<sup>1</sup>: Yes  No  If yes for what region \_\_\_\_\_

Manufacturing rights<sup>1</sup>: Yes  No

### GENERAL INFORMATION

|   |                         |
|---|-------------------------|
| 1 | <b>COUNTRY</b><br>_____ |
|---|-------------------------|

|   |                              |
|---|------------------------------|
| 2 | <b>COMPANY NAME</b><br>_____ |
|---|------------------------------|

|   |                                 |
|---|---------------------------------|
| 3 | <b>FOUNDATION YEAR</b><br>_____ |
|---|---------------------------------|

|   |                           |
|---|---------------------------|
| 4 | <b>OWNERSHIP</b><br>_____ |
|---|---------------------------|

|   |                               |                |
|---|-------------------------------|----------------|
| 5 | <b>CENTRAL OFFICE ADDRESS</b> |                |
|   | STREET                        | _____<br>_____ |
|   | CITY                          | _____          |
|   | ZIP CODE                      | _____          |
|   | CORP. PHONE #                 | _____          |

<sup>1</sup> Note if you answered yes for either of these questions a license fee will be calculated and provided to you for acceptance





|   |                      |  |
|---|----------------------|--|
| 6 |                      |  |
|   | CORP. FAX #          |  |
|   | WEB ADDRESS / E-MAIL |  |

|   |  |  |
|---|--|--|
| 6 | <b>OTHER REGIONAL OFFICES OR SERVICE CENTERS</b> |  |
|   |  |  |
|   |  |  |
|   |  |  |

|   |                           |  |
|---|---------------------------|--|
| 7 | <b>BANKING REFERENCES</b> |  |
|   |                           |  |
|   |                           |  |

**ORGANISATION (ATTACH COMPANY PROFILE )**

|   |                   |  |
|---|-------------------|--|
| 8 | <b>ORG. CHART</b> |  |
|   |                   |  |
|   |                   |  |
|   |                   |  |
|   |                   |  |

|   |                            |  |
|---|----------------------------|--|
| 9 | <b>NUMBER OF EMPLOYEES</b> |  |
|   |                            |  |

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

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





**MARKET OVERVIEW**

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

|    |   |
|----|---|
| 13 | <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 COUNTRY (TOTAL SALES BY COMPETITORS, MARKET SHARE, YOUR PURCHASE TARGET FOR THE NEXT THREE YEARS)</b> |
|    |  |
|    |  |
|    |  |
|    |  |





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resources & energy



*The Voice Of The Spill Control Industry*

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## **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:

WHERE ARE THE ENGINEERS LOCATED:

ARE YOU WILLING TO CARRY SPARE PARTS STOCK:

ANY OTHER RELEVANT INFORMATION:

