

DISTRIBUTORSHIP/DEALERSHIP INQUIRY FORM (DDIF)

All fields are mandatory – please email with your company profile to sales@earthtech.in

Date: _____

Request for: ☐ Distributorship or ☐ Dealership

Company Name: _____ Company Address: _____

Contact Name: _____ Mobile Number: _____

Email: _____ Website: _____

Company Google Map Location: _____

Nature of Business: ☐ Trading ☐ Manufacturing ☐ Contracting ☐ Other: _____

Present Product Line: _____

Territory of Interest: _____

Which product of EIP are you interested to sell? ☐ ECP-320 ☐ ESP-320 ☐ ECP-450 ☐ ESP-450

If seeking distributorship, what stock levels do you intend to maintain? _____

What are your sales targets for the 0-12, 12-24 and 24-36 month periods? _____, _____, _____ Sets

Do you presently deal in electrical, earthing and/or lightning protection equipment? If so what products and brands?: _____

Other comments or remarks: _____

Signed:

Name: