

Prospective Distributor Questionnaire



Please complete this questionnaire as thoroughly as possible so full consideration can be given to your suitability. Questions marked with * are mandatory. These fields must be filled, otherwise we cannot consider your inquiry.

1. COMPANY PROFILE:

Contact Name*:

Company Name (Please with legal form)*:

Address/City*:

Telephone Number*:

Fax Number*:

E-Mail Address*:

Website*:

I. Number of Employees:

Sales*: Marketing*: Administration*:

Customer Service*: Service Engineers*:

Others*: Total numbers of employees*:

II. Locations and further information

Do companies exist with which you are affiliated (subsidiaries)*? Yes No

If companies exist with which you are affiliated, please give the name, address and the phone number of your subsidiaries:

Company Name*:

Address/City*:

Telephone Number*:

E-Mail Address*:

Website*:

Please list the number and locations of any warehouses, offices and any other premises (without

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subsidiaries) that operate off-site within your company:

Warehouses (Number/Locations)*:

Offices (Number/Locations)*:

Other premises (Number/Locations)*:

Do you work with, or through other channels of distribution such as sub-distributors, wholesalers or independent representatives*? Yes No

Capital structure*: sole trader partnership corporation public

private other (please specify):

Please indicate your last year's revenue in EUR*:

Which countries do you presently cover*?

III. Please name your 4 bestselling product lines with percentage of total sales*

1st

Percentage of annual sales (in %)

Development compared to previous year Growing Declining Flat

2nd

Percentage of annual sales (in %)

Development compared to previous year Growing Declining Flat

3rd

Percentage of annual sales (in %)

Development compared to previous year Growing Declining Flat

4th

Percentage of annual sales (in %)

Development compared to previous year Growing Declining Flat

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IV. Please name the 3 industrial sectors with percentage of total sales (year 2018)

1st industry sector*:

2nd industry sector*:

3rd industry sector*:

V. Our products:

Our products are divided into six categories: CONTA-CONNECT for terminal blocks and accessories, KDS cable management systems, CONTA-ELECTRONICS for electrical and electronic switchgear cabinet components, CONTA-LABEL for marking systems, CONTA-BOX for housings, and CONTA-CON for PCB terminal blocks and connectors. Please specify which products you are interested in and what sales you plan to achieve with our products in the next 3 years*:

CONTA-CONNECT

Sales after: 1 year:

2 years:

3 years:

KDS Cable management systems

Sales after: 1 year:

2 years:

3 years:

CONTA-ELECTRONICS

Sales after: 1 year:

2 years:

3 years:

CONTA-CON

Sales after: 1 year:

2 years:

3 years:

CONTA-BOX

Sales after: 1 year:

2 years:

3 years:

CONTA-LABEL

Sales after: 1 year:

2 years:

3 years:

VI. OTHER

What technical qualification do your sales people have*?

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Do you already have products of the same product classes as we offer in your assortment*?

Yes No

If yes, which products are these*?

If yes, who are the manufacturers of these products*?

how many companies are already represented by you*?

Do you have your own distribution transport*?

Yes No

Which trade shows do you participate in this year*?

What would be your marketing plans to advertise, exhibit, and/or promote the CONTA-CLIP product line*?

How do you promote the existing products of your product portfolio*?

Why should CONTA-CLIP select you as a distributor, and future business partner?

All questions answered, that were marked with *?

Yes No

This document **does not** constitute an agreement between the applicant and CONTA-CLIP Verbindungstechnik GmbH as a representative of CONTA-CLIP products.

Send us the completed form by clicking on the following button:

[Send by E-Mail](#)

If the button does not work, please send the form manually to steffen.hans@conta-clip.de