

Reseller Enquiry Form

Thank you for your interest in our product range. Please take a moment to complete the following details and send the form back to us. If successful, you will be representing Taylor Pass Honey Co on the international stage. Selecting the best agent, distributor or seller of our products is vitally important to us. We are looking to partner with like-minded companies who share our vision, passion and commitment to our brand.

* Compulsory Fields In which Countries/Regions/Cities do you intend to promote and sell Taylor Pass Honey Co products? * **Contact Information** First (Given) Name* Last (Family) Name* Position Company Name* Company Website URL* Email Address* Mailing Address Line 1* Town/City* State/Province* Country* Phone Number* Type of Business* ☐ Limited Company ☐ Partnership ☐ Sole Traders ☐ Indivdual

Year of Registration*	
Bank*	
Branch	
Annual Turnover	
Staff Numbers*	
Business Experience*	
Describe the opportunity you have for our	honey in your region:
What awareness have you had introducing awareness?	g a new product line in your region and creating customer
What products to you currently distribute	to retailers?
Briefly describe why Taylor Pass Honey Co	should consider you as a distributor.
Please provide two commercial reference	es that you buy from*
Company 1	
Contact Name	Phone number/email

Company 2	
Contact Name	Phone number/email
Acknowledgement	
Full Name	Position
Signature	Date