- Use one answer per line
- Use an attached extra sheet when answers require more lines.

Company Name:				
Address:		(City:	
State:	Country:		Zip Co	ode:
DI N I		E N 1		
Phone Number:				
Contact Person:		Email Address	<u> </u>	
Country of Distribution:				
Name of principal:				
Date of birth:				
Nationality:				
Resident or national of territory:				
· -				
DEMOGRAPHIC INFORMAT	TION OF YOUR T	ERRITORY.		
(use duplicate sheet if seeking more t	han one country).			
Total population:		<u> </u>		
Number of visitors annually:		_		
Name of major cities and/or reson	rt areas with number	of population in	n each city or major i	resort area:
GENERAL INFORMATION				
What year was	your compa	any estab	lished? :	
		How many	full time	
employees are on you	r payroll? :	How many	sales reps do you	
have?				
What other brands do you carry				
*Do you import any other brands	of watches and jewe	elry?: YES	NO	
If YES, please list:				
Do you import any other products	s?: YES		NO	
If YES, please describe the produ			110	
ii 123, piease describe die produ	ets.			

*Do you have your own warehouse or do you use an external	facility?			
*Do you have your own after sales service center or do you use an external facility?				
Please list a breakdown of accounts by type:				
Nationwide	Your Clients			
# of Specialty store accounts				
# of Gift store accounts				
# of Airport store accounts				
# of Surf shop store accounts				
# of Golf pro shop accounts				
# of Jewelry store accounts				
# of Department store accounts				
# of Duty free stores				
# of boutique				
Please name the main ones:	<u> </u>			
# of Other accounts				
# of Accounts owned by you				
Who are the target end-customers of your retailers?:				
701 - 17 - 1 - 1 - 1 - 1				
Please list their major brands:				
*Dlaces list in direct commetitors				
*Please list indirect competitors.				

* Strengths and Weaknesses of each competitor:	
*Strengths and Weaknesses of our Collections.	
What type of distribution channel do you intend to sell our products? :	
What Type of advertising means are the most used in your country for watches and Jewelry?	
Do you have an internal marketing department?: YES NO	(elaborate if yes)
How do you intend to position our line in your Territory?	

	do you intend to launch our line in yo	-		
eas	se annex possible Advertising plan and	d Public Relations plan fo	or the launch and for the 1	st year of
str	bution* (for distributors only):			
 ssu	me an EXW price of \$100.00. Give t	us a detailed analysis of th	he costs involved to get th	is item all the way
th	e final retail price in your country.			
e s	hip indifferently from 3 distribution c	enters Houston, TX – Mi	iami, FL – St Maarten Du	ıtch Caribbean.
	Ex Factory price:	100.00	100.00	100.00
	Select your currency: US\$ €			
	EXW location:	Houston, TX	Miami, FL	Hong Kong
	Air freight to destination:			
	Landed cost:			
	Additional cost (Duties, etc):			
	Distributor margin:			
	Retailer margin:			
	Retail selling price to customer:			
	VAT or Sales Tax			
	Retail price tax included			

SALES PLAN			
Three years projections for:			
Select your currency: US\$ €			
# Points of Sale	#of Units	Sales volume	
Year 1:			
Year 2:			
Year 3:			
* Use the same projections if yo	ou are seeking a ter	ritory that comprises mo	re than one country.
# Points of Sale	#of Units	Sales volume	
Year 1:			
Year 2:			
Year 3:			
# Points of Sale	#of Units	Sales volume	
Year 1:	nor Cints	Sales volume	
Year 2:			
Year 3:			
Tour 3			
FINANCIAL INFORMATION	I		
Bank Name:			
Address:		City:	
		· · · · · · · · · · · · · · · · · · ·	Zip Code:
Phone Number:		Fax Number:	
Bank officer/s:		Email Address:	
Type of bank account:	CHECKING	SAVING	вотн
Preferred method of pay			

*(Confirmed and irrevocable Letter of Credit for over \$250,000 all cost born by you, credit card charges born by you)

Please list five credit references with whom you are currently doing business:

1) Company Name:			
Address:		City:_	
State:	Country:_		Zip Code:
Phone Number:		Fax Number:	
Contact Person:			
	_		
Annual purchases/sales in US\$:			
2) Company Name:			
		-	
State:	_ Country:		Zip Code:
Phone Number:		Fax Number:	
Contact Person:			
Annual purchases/sales in US\$:			
•			
3) Company Name:			
State:	_ Country:		Zip Code:
Phone Number:		Fax Number:	
Contact Person:		Email Address:	
Annual purchases/sales in US\$:			
4) Company Name:			
State:	_ Country:		Zip Code:
Phone Number:		Fax Number:	
Contact Person:			
Annual purchases/sales in US\$:			
5) Company Name:			
Address:			

State:	Country:		Zip Code:	
Phone Number:		Fax Number:		
Contact Person:		Email Address:		
Annual nurchases/sales in I	122.			

SHIPPING INFORMATION Preferred carrier: Preferred method of shipping: Do you have a preferred shipping Agent?: YES NO If YES, please complete agent information: Agent Name: _____City:_____ State: ______ Zip Code: ______ Phone Number: _____ Fax Number: _____ Contact Person: Email Address: ____ **Special shipping instructions: Special packing instructions:** Do you need: _____Packing list _____Commercial invoice ____Air Way Bill (AWB) ____Bill of lading (B/L) _____Certificate of origin (C/O) _____Cites Certificate (C/A) or yet Certificate of Authenticity Export declaration ____Other (please explain) : Other information that you might find interesting to communicate with us: Handwrite the following statement: "This information is true and correct to the best of my knowledge. I hereby authorize Denizen World® to verify the references I'm providing here above". Handwrite name

Date and signature____/____