



Make the green turn!

## PARTNERS FORM

### COMPANY DATA

Business name

Registered Office  Town  ZIPCode  Country

Head Office  Town  ZIPCode  Country

VATnr.  Phone  Fax  Mob.

Website  E-mail

Owner/Purchase manager

### BUSINESS DATA

#### 1. Business category

retailer  wholesaler  sales representative  commercial agent  Year of establishment

2. Number of employees  Number of agents, sales representatives, salesmen

3. Represented Brands

#### 4. Last year revenues (thousands of €)

0-100  100-200  200-400  400-600  600-1000  over 1000

5. Number of further local offices, if any  Location

#### 6. Scale of the business

neighborhoods  provincial  regional  transregional  national  international

### CUSTOMERS DATA

Customers' allocation: private  organizations  businesses (restaurants/farm houses)  others

7. How many of your actual customers could potentially buy our product?

8. Annual sales forecast

9. Are you already an authorized retailer or customer support centre of any company/product? YES  NO

10. Would you be able to grant technical assistance for pur product, after an adequate training from our staff? YES  NO

11. Your business is located: downtown  suburbs  shopping precinct  shopping centre

12. Your business takes place in: shop  exhibition  show room  shed

13. Do you have a dedicated exhibition space for our product? sq.m.

Consent for processing of personal data according to the current Privacy Protection Laws YES  NO

Please return form by Post or Fax to the attention of "GoFour Partners Form".

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