



**APPLICATION FOR:
NEW DISTRIBUTOR ACCOUNT**

Proposed Country of Distribution: _____

Company Name: _____

Type of Business: _____

Mailing Address: _____

Contact Info: _____ **Tel:** _____ **Fax:** _____
(include country code)

E-Mail Address: _____

Contact Person(s) and Titles: _____

FINANCIAL INFORMATION -

Annual Sales in 2009: _____
(USD only)

Annual Sales in 2010: _____
(USD only)

Annual Sales in 2011: _____
(USD only)

Annual Sales in 2012: _____
(USD only)

PRINCIPLE OWNER(S): _____ **OWNERSHIP PERCENTAGE:** _____

Upon completion of Information, please e-mail to: sales@bluefieldinc.com or fax to (909)-476-6084.



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US Trade & Business References:

(Include names of US companies or Banks: full mailing address, phone, fax, e-mail and contact persons)

1. _____
2. _____
3. _____

Competitive Products Existing in Your Proposed Distribution Territory:

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Competitive Products You Currently Carry in Your Distribution Line:

(Please rank, starting with the highest volume)

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Comments Section:

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