



For internal use only

Customer ID	_____	
Sales ID	Prior _____	Current _____
Rep ID	_____	
Price Level	_____	
Term	_____	
Business Type	_____	
Approved by	_____	Date _____

DEALER PROFILE

PLEASE EMAIL BACK TO sean.ting@rubbershox.com

Please complete the Dealer Profile to the best of your ability. This information will provide a good picture of the company's potential, structure, and sales strategies. Your recommendation on pricing should be supported by the information provided. A separate credit application must be completed to establish a line of credit with RubberShox.

Company Name _____ Phone: _____ Fax: _____

Address: _____ City: _____ State: _____ ZIP: _____

Years in business _____ # Years at this location _____ Total Sales \$ _____
 # Branch offices _____ (please provide branch details on reverse side) # Projectors sold monthly _____
 # Outside sales personnel _____ # Inside sales personnel _____ # Screens sold monthly _____
 Territory covered (states) _____ *****Pricing Recommended: [] Authorized [] Target*****

Type of business – check all that apply [] Bid [] Distribution [] Integrator []
 Repair Shop [] eCommerce [] Installer [] Retailer [] Other _____

Services offered by % _____ %Home _____ % Rental _____ % Installation
 _____ %Contract _____ % Training _____ % Other _____

Marketing Efforts – check all that apply [] Catalog [] Web Page _____
 [] Trade Shows [] Promotions [] Mailings [] Advertising
 [] Spiffs OK [] Other _____

CONTACTS

Decision Maker _____	Phone _____	e-mail _____
Sales Manager _____	Phone _____	e-mail _____
Accounts Payable _____	Phone _____	e-mail _____
Purchasing _____	Phone _____	e-mail _____
Warehouse _____	Phone _____	e-mail _____
Service Manager _____	Phone _____	e-mail _____

COMMENTS

BRANCH LOCATIONS

Branch Address: _____	City _____	ST _____	ZIP _____
Phone (____) _____	Fax (____) _____	Manager: _____	
# outside sales reps _____	# inside sales reps _____	e-mail: _____	

Branch Address: _____	City _____	ST _____	ZIP _____
Phone (____) _____	Fax (____) _____	Manager: _____	
# outside sales reps _____	# inside sales reps _____	e-mail: _____	

Branch Address: _____	City _____	ST _____	ZIP _____
Phone (____) _____	Fax (____) _____	Manager: _____	
# outside sales reps _____	# inside sales reps _____	e-mail: _____	

Branch Address: _____	City _____	ST _____	ZIP _____
Phone (____) _____	Fax (____) _____	Manager: _____	
# outside sales reps _____	# inside sales reps _____	e-mail: _____	

Branch Address: _____	City _____	ST _____	ZIP _____
Phone (____) _____	Fax (____) _____	Manager: _____	
# outside sales reps _____	# inside sales reps _____	e-mail: _____	

Branch Address: _____	City _____	ST _____	ZIP _____
Phone (____) _____	Fax (____) _____	Manager: _____	
# outside sales reps _____	# inside sales reps _____	e-mail: _____	