



Ultrasolar Technology Representative Renewal Form

Representative Name: _____

Contact Name: _____

Address: _____

City: _____ Country: _____

Telephone: _____ Fax: _____

Website: _____ Email: _____

Sales Territory: _____

Sales Volume during prior agreement: _____(USD).

Commissions: _____; % Ultrasolar products _____; % Ultrasolar spares; _____; % Services; _____

Pricing based on international price list: yes no (if no, explain _____)

ITEM	ATTRIBUTES	RATING (1-10)	% WEIGHT FACTOR	OVERALL RATING (Rating x %WF)
1	GET ORDERS			
2	CUSTOMER CONTACTS/INFLUENCE			
3	IDENTIFIES/CREATES OPPORTUNITIES			
4	CUSTOMER KNOWLEDGE/EXPECTATIONS			
5	MARKETING/PROMOTION/FORECASTING			
6	FINANCING SAVVY			
7	DEVOTES TIME TO ULTRASOLAR			
8	COMMUNICATES/COOPERATES			
9	ASSERTIVE			
10	FINANCIAL STABILITY			
11	RELIABLE			
12	SERVICE SUPPORT			
13	ORGANIZATIONAL STRENGTH			
14	INTEGRITY			
15	ULTRASOLAR PRODUCT/SYSTEM KNOWLEDGE			
16	COMPETITIVE ANALYSIS			
17	TECHNICAL COMPETENCE			

OVERALL RATING (SUM OF ITEMS 1-17; WEIGHT FACTOR SUM MUST EQUAL 100%): _____.

Scale: Poor (1-3); Average (4-6); Good (7&8); Excellent (9&10)

Justification

Ultrasolar should appoint this Representative for an annual term and the proposed commission because:

Attachments: Questionnaire Other Due Diligence

Appointment of this Dealer is recommended:

Account Manager/Date: _____ **Regional Sales Director/Date:** _____

Contracts/Date: _____