

Ultrasolar Technology Reseller Application Questionnaire

ULTRASOLAR will use the information *voluntarily* provided by you on this questionnaire in evaluating your company's qualifications and capabilities as a prospective Reseller of ULTRASOLAR products and services. ULTRASOLAR will treat all information provided herein on a confidential basis, and will use and disclose to third parties such information only for the purpose of evaluating or verifying your company's qualifications and fitness for consideration as a ULTRASOLAR Reseller. Receipt by ULTRASOLAR of this questionnaire shall create no commitments, agreements or obligations on either your company or ULTRASOLAR, and is for evaluation purposes only.

GENERAL INFORMATION

Company Name: _____
Contact Name: _____ **Title:** _____
Address: _____
City: _____ **State:** _____ **Zip Code:** _____
Country: _____
Telephone: _____ **Fax:** _____
Telex: _____
Website: _____
Email: _____

COMPANY INFORMATION

Describe the major business activities of your company:

Principal Officers or Owners:

Name & Title: _____

Name & Title: _____

Number of Years in Business: _____

Your company is a:

- Corporation
- Partnership
- Proprietorship
- Limited Liability
- Other (Please List): _____

Indicate the number of employees in the following functions:

Sales: _____

Services: _____

Installation: _____

Administration: _____

Application Engineering: _____

Other: _____

Parent Company Name and Address (If Applicable):

Please list your company's Branch Offices or Representatives:

FINANCIAL INFORMATION

Please Attach Financial Information or Annual Report. Last Years Sales (U.S. Dollars): _____
Current Sales (U.S. Dollars): _____ Next Year's Sales Forecast (U.S. Dollars): _____

Please provide bank references who can be contacted as to duration, nature of relationship, experience with and opinion of your company, etc. (Include bank name, contact, account number, address and phone number.)

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

Please provide three business references familiar with the operations, integrity and stability of your company: (Include name, address and phone number.)

1. _____
2. _____
3. _____

MARKETING INFORMATION

Are you currently an agent, a representative, reseller or distributor for any other company that manufactures similar products? Yes No

Please indicate the Industry or commercial organizations, which you currently sell to:

Distributors Installers EPCS Commercial Developers Other

Which two do you consider to be your best markets? _____

Have you ever been an agent, representative, reseller or distributor of ULTRASOLAR equipment? Have you ever worked with Ultrasolar in any capacity? Yes No

If yes, please provide details: ___ We have been a Ultrasolar authorized distributor for QuantumBoost™ products until now _____

What other products/manufacturers does your company represent? Please list them all and the length of time you have represented them. _____

Please describe your product display area, product demonstration procedures and support program: ___ Display area: _____. Product demonstration procedures are based on specific presentation at the customer premises or in our Show room. Support program is based on face to face meeting. _____

Do you provide warranty repair on the products you sell? Yes: _____ No: _____

Please attach your warranty policy.

How would you introduce ULTRASOLAR products into your territory? (Advertising, Direct Mail, Cold Calling, Facebook, Twitter, Web Online) Selling products to your existing customers)

Please attach any other information you think would be important to us in our evaluation process.

This questionnaire was completed by:

Name: _____

Title: _____

Date: _____

Signature: _____

Please return information to your Ultrasolar Sales Representative at sales@Ultrasolar.com with a copy to Darryl Parker at darryl@Ultrasolar.com

ATTACHMENT

Bank/Payment Information

Bank Name: _____

ABA # _____

Swift # _____

Account Holder/Beneficiary Name: _____

Swift # _____

Account # _____

Final Credit: _____

Account No. _____

Asunción – _____