**Potential and existing sales aGENT aPPLICATION form**

**1、 Introduction**

Your company intends to apply for SURAPID ELEVATOR CO., LTD (hereinafter referred to as our company) product sales and service agents, and fill out this information disclosure form according to the requirements of our company. Based on this information disclosure form, our company will evaluate whether your company and other companies follow the same standards of business ethics and trade compliance standards, and can become (or continue to be) our trusted business partners.

The information returned by you in this information disclosure form will be one of the factors that we will consider when deciding whether to sign a contract or renew a contract.

**2、Basic Information of your company**

|  |
| --- |
| **2.1. Basic Information** |
| ***Full Name*** |  |
| ***Legal representative******(Chairman of the Board/CEO)*** |  |
| ***Legal representative mobile phone*** |  |
| ***Address*** |  |
| ***Company registration number in the government*** |  |
| ***Document mailing address*** |  |
| ***Business scope (must including elevator sales business)*** |  |
| ***Last year's business income (in USD)*** |  |
| ***Company Phone Number*** |  |
| ***Fax Number*** |  |
| ***Website*** |  |
| ***Email*** |  |
| ***Contact person*** |  |
| ***Mobile phone of contact person*** |  |

|  |
| --- |
| **2.2.** **Please list the general manager, financial officer of the participating company and the staff who will be responsible for contacting us.** |
| **Name** | **Address** | **Nationality** | **Citizen ID** | **Phone Number** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **2.3. Business, trade and industry association****Please list all the commercial, trade or industry associations in which your company has membership and your company participates in or provides services.** |
| **Name of association** | **Name of your company’s participant(s)**  |
|  |  |
|  |  |
|  |  |

**3、 Relationship with our company's past or present**

|  |
| --- |
| **3. 1** Please briefly describe all business relationships (time and place, your main business relationship, business relationship type) between your company and our company. *If there is no business relationship before, how is your company knowing our company?* |
|  |

**4、 Business ethics / compliance requirements**

|  |
| --- |
|  |
| **4.1**. Will your company provide training for employees on compliance policies? | **☑YES / NO☐** |
| **4.2.** Does your company know and agree that if it becomes an intermediary or distributor of our company, it will not make any improper payment or bribe to anyone in any form or anything of value.*This means that it is forbidden to make payments to any person or to provide valuables (including directly by your staff or indirectly by any other person) to influence their decision to be beneficial to the two companies or related transactions. .**If "No", please explain the content that is not clear, or what your company can't agree with.* | **☑YES / NO☐** |
|  |
| **4.3.** Has your company ever been suspended or revoked by any government agency for a license, license or other authorization? *If yes, please provide details.* | **☐YES / NO☑** |
|  |
| **4.4.** Any shareholder, director or key person listed by your company in the “Basic Information” section of Part II above, as far as your company knows, whether there have been employees who have: |  |
| 1. Have you been investigated by the judicial or government departments?

*If yes, please provide details.* |  **☐YES / NO☑** |
|  |
|  (b) Suspended business, detained by the judiciary for more than 24 hours, or identified as fraudulent, bribery, misrepresentation or other illegal act, or is the allegation being investigated? *If yes, please provide details.* |  **☐Yes / NO☑** |
|  |

**5、 Referrer**

|  |
| --- |
| **5.1.** Please provide referrer to confirm the information provided by you in this form. |
| **Full Legal Company Name** | **Address** | **Contact Name** | **Telephone** |
|  |  |  |  |
|  |  |  |  |

**6、Confirmation and signing**

After completing and signing this information disclosure form, your company:

* Understand and agree, (1) Whether your company can become the sales and service agent of our company's products, we need to be reviewed and approved by our company, and your company can finally become our agent after signing the relevant agreement with our company. . (2) Before our company approves your candidate qualification and our company has signed or renewed the written agreement on the terms and conditions of the relationship between the two parties, you may not conduct any business with us or on behalf of our company;
* Authorize and agree, we can conduct a background check on your company to assess whether your company is suitable as our representative or distributor;
* Authorize and agree that we will process and use the information provided in this questionnaire and as a material for our company to evaluate your company;
* Understand and agree that if your company is approved to sign a written agreement on the relationship between the parties, if we find that your company has not completed this information disclosure form within a reasonable time (determined by our company), or provide false information in this form. Incomplete or misleading statements (as determined by our company), we have the right to terminate the above agreements and take other actions permitted by contract or applicable law.

hereby certifies that the above answers to the questionnaire are true and complete.

|  |  |
| --- | --- |
| **Company NAME** |  |
| **AUTHORIZED REPRESENTITIVE** |  |
| **POSITION / TITLE** |  |
| **Date** |  |
| **Company Seal** |  |