**Partnership(Distributor) Application Form**

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| --- |
| **Company Information** |
| Company Name |  |
| Annual Revenue | ( )M USD | #of employees |  |
| Address |  | Country |  |
| Main Products of the company |  |
| **Personal Information** |
| Name of Contact (1) |  | e-mail |  |
| Position Title |  | Tel. |  |
| Name of Contact (2) |  | e-mail |  |
| Position Title |  | Tel. |  |
| Name of Contact (3) |  | e-mail |  |
| Position Title |  | Tel. |  |
| Name of President |  | e-mail |  |
|  | Tel. |  |
| **Business Relation** |
| Why are you interested in ROBOTOUS Products? |  |
| How will you expand your business with ROBOTUS products? |  |
| What kinds of assistance will you need from ROBOTOUS? |  |
| Any Comments? |  |