

VALUE-ADDED RESELLER APPLICATION FORM

THANK YOU FOR YOUR INTEREST. PLEASE GIVE US SOME INFORMATION ABOUT YOURSELF AND YOUR BUSINESS

About Your Company

Your Company / Business Name : _____ BRN: _____

Business Address : _____

Tel No : _____ Fax No : _____ URL : _____

About Your Business

Name of Contact Person : _____ Office Tel: _____

Mobile Phone: _____ Pager: _____ Email: _____

My Company sells goods and services to consumers / companies (please circle 1 or both)

Describe the nature of your Company's business (eg. types of goods & services, brand names carried etc):

Number of employees:

Total: _____ Direct Sales: _____ Customer Service: _____ Technical: _____

Total number of active end-customer accounts: _____ (people you do business with at least once a quarter)

Do you sell through Distribution Channels? YES / NO

If answer is YES, please describe:

What goods or services are sold through these channels? _____

Business nature of these channels: _____

Number of channel partners: _____ Percent sales from channel partners: _____ % of total sales

Why do you want to be an iWorld Partner? (Please tell us why you want to be an iWorld reseller?)

Please tell us your estimate of iWorld services you can averagely sell in a month:

(Please see iWorldAccess Services & Price List schedule for details of iWorld services. Please make your best estimate as these numbers are needed for capacity planning purposes)

ADSL: _____ Leased-lines: _____ lines (_____ Mbps) ATM: _____ lines (_____ Mbps)

Joint Offerings

From time to time, Iworld will work with partners to provide joint offers to its customers. If you would like your product / services to be included in any future marketing plans, please provide some information about them to us. (Use a separate sheet if insufficient).

Sales Objectives

Iworld takes a pro-active approach to work with partners to achieve their sales objectives. These plans are reviewed and refined during the course of the relationship. To ensure a fruitful and profitable relationship, Iworld would like you to provide us an outline of your sales objectives for the next 2 quarters, so that we can jointly work towards achieving those targets. (Use a separate sheet if insufficient).

Submission

Submitted By (name) : _____

Signed: _____

Designation : _____

Date : _____

Company stamp: _____

Official Use Only

Partnership ID : _____

Relationship Manager : _____

Approved by: _____

Signed: _____

Date: _____

Remarks : _____