

**INSTRUCTIONS:** Save this form to your desktop. Fill in the form fields using Adobe Acrobat Reader, version 7 or later. Click "Highlight Existing Fields" in the top right of the Acrobat form menu to see individual and required fields. Save the completed form and send via email attachment to [b.wesolek@dataitd.com](mailto:b.wesolek@dataitd.com) or print and fax to (239) 491-2554.

**Company Information**

Legal Company Name \_\_\_\_\_

Trade Name (if different than legal) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Toll Free Phone \_\_\_\_\_

Fax \_\_\_\_\_ Website \_\_\_\_\_

Previous Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Toll Free Phone \_\_\_\_\_

Fax \_\_\_\_\_ Website \_\_\_\_\_

**Key Management Contact**

	name	email	phone
Primary Owner or CEO	_____	_____	_____
Sales	_____	_____	_____
Business Development	_____	_____	_____
Marketing	_____	_____	_____
Administration	_____	_____	_____
Accounts Payable	_____	_____	_____
Software/Hardware Dev.	_____	_____	_____

**Company Description**

In 500 words or less, please provide a company description.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Company History**

In 500 words or less, please provide a company history.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Company Ownership & Structure**

Individual     Partnership     Corporation    Year Established \_\_\_\_\_  
 Number of Employees \_\_\_\_\_    Number of Sales People \_\_\_\_\_  
 Are you a public company?    Yes     No    If yes, please provide a trading symbol \_\_\_\_\_  
 Dun & Bradstreet Number \_\_\_\_\_    Company Annual Sales 2015 \$ \_\_\_\_\_  
 Company Annual Sales 2016 \$ \_\_\_\_\_    Company Annual Sales 2017 (projected) \$ \_\_\_\_\_  
 Years at Current Address \_\_\_\_\_    Years at Previous Address \_\_\_\_\_  
 Years in Business \_\_\_\_\_

**Market Overview**

Please check the hardware products your company offers.

Tablet Computers                       Mobile Computers                       Rugged Laptops                       POS Computers  
 Vehicle Computers                       Kiosk                       Magnetic Stripe Readers                       Digital Signage  
 Touch Screen Monitors                       Cash Registers                       RFID                       Barcode Printers  
 Receipt Printers                       Refurbished Equipment                       Smartphones/PDA  
 Other Hardware (please explain) \_\_\_\_\_

Please check the software/application products your company offers.

Restaurant POS Software                       Healthcare Software                       Retail POS Software                       WMS Software  
 Field Service Software                       Public Safety Software  
 Other Software (please explain) \_\_\_\_\_

Please check the services your company offers.

Hardware Maintenance                       Installation Services  
 Other Services (please explain) \_\_\_\_\_

Please list other tablet computers you offer. \_\_\_\_\_

Please check the distribution partner(s) you use.

Blue Star                       Ingram Micro                       Scan Source                       Synnex/EMJ                       TechData  
 Other (please explain) \_\_\_\_\_

Please check the vertical market segments you service; then add the approximate percentage of sales in each vertical.

Retail                      \_\_\_\_\_ %     Field Service                      \_\_\_\_\_ %     Transportation                      \_\_\_\_\_ %  
 OEM                      \_\_\_\_\_ %     Manufacturing                      \_\_\_\_\_ %     Distribution                      \_\_\_\_\_ %  
 Healthcare                      \_\_\_\_\_ %     Government                      \_\_\_\_\_ %     Other                      \_\_\_\_\_ %

I hereby certify that to the best of my knowledge all the information provided in this statement is accurate and hereby give my permission to verify any and all facts disclosed herein.

Applicant's Name (printed) \_\_\_\_\_    Date \_\_\_\_\_  
 Authorized Signature \_\_\_\_\_    Company Name \_\_\_\_\_  
 Title \_\_\_\_\_    Phone \_\_\_\_\_    Extension \_\_\_\_\_  
 Email Address \_\_\_\_\_

