

## EXPRESSION OF INTEREST FORM

PLEASE COMPLETE THE FORM FILLING IN ALL FIELDS THEN EMAIL TO - [info@greenfrogsystems.com](mailto:info@greenfrogsystems.com)

PREFIX  MR / MRS / MS / MZ FULL NAME

DESIGNATION / POSITION

### YOUR COMPANY DETAILS

COMPANY NAME  TYPE OF COMPANY

TYPE OF BUSINESS

PRIMARY CONTACT  POSITION

BUSINESS ADDRESS

TELEPHONE  FAX

EMAIL  WEB URL

STATE YOUR OBJECTIVE FOR BECOMING AN AGENT

### FINANCIALS + PARTICULARS

NO. OF EMPLOYEES  NO. OF YEARS INDUSTRY EXPERIENCE

DO YOU HAVE OR HAVE YOU EVER REPRESENTED SOLAR LIGHTING PRODUCTS?

IF YES WHOM DID YOU REPRESENT?

TERRITORY OR STATE OF INTEREST?

WHICH PRODUCTS DO YOU FEEL WILL BE THE MOST SUCCESSFUL SELLING IN YOUR TERRITORY

HOW WILL YOU PROMOTE GFS PRODUCTS?

### REFERENCES (PROVIDE AT LEAST 3)

COMPANY NAME  1 PHONE

EMAIL ADDRESS

COMPANY NAME  2 PHONE

EMAIL ADDRESS

COMPANY NAME  3 PHONE

EMAIL ADDRESS

COMPANY NAME  4 PHONE

EMAIL ADDRESS

**AGENCY AUTHORITY SIGNATURE**

### OFFICE USE ONLY

RECIEVED DATE  EVALUATION DATE  INITIAL