



# ROGEV COMPUTERS LTD.

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## Distributor Application Form

### **Company Profile**

Company Name: \_\_\_\_\_ contact Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State / Province: \_\_\_\_\_ Country: \_\_\_\_\_

ZIP / Postal Code: \_\_\_\_\_

Tel: (\_\_\_\_\_) - \_\_\_\_\_ Fax: (\_\_\_\_\_) - \_\_\_\_\_

Email: \_\_\_\_\_ Web Site: \_\_\_\_\_

### **Business Profile**

Organization Type:  Sole Proprietorship  Partnership  Corporation

Business Classification:  Retail Storefront  Distributor  Consultant

Other: \_\_\_\_\_

How many years is your company in business? \_\_\_\_\_

How many locations does your company have? \_\_\_\_\_

What are your annual Sales?  \$0 to \$100,000  \$100,000 to \$500,000  
(In US Dollar)  \$0.5 million to \$1 million  \$1 million to \$10 million  
 \$10 million to \$50 million  \$50 million or more

How many employees do you have? Sales: \_\_\_\_\_ Service: \_\_\_\_\_

Do you service your products?  Yes  No

Do you provide networking solution?  Yes  No

I hereby certify that the submitted information is true and complete to the best of my knowledge.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_