# inaconi

### **Distributor Qualification Requirements**

I-MACONI is committed to the success of our brand and our distributors. Our goal is to offer distributorship to the most qualified people in each market and establish long- term mutually beneficial business relationship with our distributors. I-MACONI distributor will enjoy exclusive representation of I-MACONI products in the authorized territory and the most competitive wholesale prices from I-MACONI.

I-MACONI takes pride in setting high standard for its authorized representatives. We seek individuals and/or businesses that are able to meet all the following three qualifications and will be dedicated in promoting and distributing I-MACONI products.

#### 1.) Distributors (Water Treatment Filtration Systems, Dispenser Water Machine)

#### **Pre-Qualification Requirements**

- o Registered Business (Provide photocopy of registration documents)
- A store/warehouse or office located within pursuing territory or territory of interest
- At least one (1) delivery vehicle
- Applicant must possess good sales/marketing skills. The prospective distributor must have experience in selling the products of interest.
- The prospective distributor must have a technical support and service team who are trained to provide professional maintenance and service for units sold;
- Duly completed application form with Utility Bill
- Letter from Banker introducing business



#### 2.) Distributors (MURLITE 5 Gallon, 500ml, 750ml Table Water, Sachet Water)

Interested individuals must have good knowledge of Lagos routes.

#### **Distributorship Requirements:**

- Registered Business
- $\circ$  A store/warehouse located within territory of interest
- At least one (1) delivery vehicle
- Applicant must possess good sales/marketing skills. The prospective distributor must have experience in selling the products of interest
- Duly completed application form.

The prospective distributor for all I-MACONI products must meet the mutually agreed annual sales quota, I-MACONI reserves the rights to adjust the sales quota annually based on market demands.

I-MACONI will work with its prospective distributors for a trial period of 6 months to develop specific regional markets. This arrangement gives both parties the flexibility to learn about each other's capabilities, establish trust and evaluate the sales potential for I-MACONI products in the local market. Upon meeting all the above three qualifications within the trial period, the potential distributor will be appointed I-MACONI distributor with a binding contract. The newly appointed distributor will be evaluated annually against the qualification requirements stated in the contract.

The distributorship will be renewed if qualifications are maintained. If the distributor fails to fulfill the requirements as stated in the contract, the distributorship will be reassessed for possible termination. If you are interested in working with us and becoming an I-MACONI distributor, please fill out the following Distributor Application Form to the best of your knowledge and email it to us at info@imaconi.com or call 08077781428.

We will evaluate your qualification and contact you shortly.



### **Distributor Application Form**

Contact Information
Business name:
Business address:
State:
Phone:
Mobile:
Email:
Company website:
Date of Establishment:
Principal contact name:
Principal contact's email:
Name & Address of Bankers:

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BUSINESS BACKGROUND
Nature of Firm: Propriety 🔜 Partnership 🔜 Private Ltd 🔜
Type of Business: Retailer 🔲 Wholesaler 🔜 Import/Export 🔜 Manufacturer
Other (specify)
Products/services you currently offer:
Number of years in business:
Number of locations:
Number of employees in sales:
Number of employees in technical service:
Yearly revenue:
DISTRIBUTION REQUESTS:
Products you are interested in distributing:
Your target market for distributing I-MACONI products (Local Government Area):
Please tell us briefly how you plan to promote and sell products. (Attach separate sheet)
How much volume do you plan to sell in the next 12 months?

Authorized Signature: .....

Date of Application: .....