

Prospective Smith-Root, Inc. Reseller

We appreciate your interest in becoming a Smith-Root, Inc. Reseller. Before being considered as a reseller we ask that you take the time to review our website. Only when we can develop a synergistic relationship can a union be successful. It is important to us that you share the philosophy and work ethics of our company and familiarize yourself with our products before you proceed.

As mentioned in our Mission Statement:

To strive for excellence through our products, fostering lasting relationships and immersing ourselves in new fisheries technology. We will not compromise our integrity; therefore, our dedicated team of employees will provide our customers with the greatest value, highest standards, best quality and utmost satisfaction.

We invite you to proceed if you follow the same concepts and ideas of our mission statement within your company. Please fill out the attached application, if something does not apply please enter "N/A", do not leave anything blank. Once your application is received, it will be submitted to the Board of Directors at their next scheduled meeting for review. Since the approval process may be time consuming, tentative arrangements can be made once a completed application is submitted. Each tentative arrangement will be at the request of the applicant in writing and will be made on a case-by-case basis within 30 days of receipt of a completed application. Tentative arrangements do not mean your application has been accepted, nor does it bind Smith-Root, Inc. to agree to the terms in a finalized contract. Upon Board approval a contract outlining the terms of the relationship will be sent for your review and signature.

Thank you for your interest in Smith-Root, Inc. and we look forward to developing a relationship with your company.

Kindest regards,

Smith-Root, Inc. Management

Reseller Application

(Attach sheets for additional space and information)

Company Name _____

Address, City, State, Providence, Country & Postal Code _____

Phone _____ Fax _____

Company Website _____ E-mail _____

Principal's Name & Title _____

Designated Representative to contact, Name _____

Phone _____ E-mail _____

Other Company Names, Locations, Websites _____

Company Affiliations _____

Year Company was established _____ Total Number of Employees _____ Accts Payable Contact Name _____

Type of Business _____ Corporation _____ Type _____

_____ Proprietorship _____ Sole/Owner _____

_____ Partnership _____ Names/Associates _____

Total revenues of the Company at the most recent year end _____

Total Generated Product/Equipment Sales at the most recent year end _____

Average 5 –Year Aggregate of Gross Revenue _____

General Liability Policy Company Name _____

Liability Coverage/Limits _____

Territories Requesting _____

Type of Business/Description _____

Description of operations (including countries you sell products to, include product list, services and/or catalog.) _____

Why does your company want to become a Smith-Root, Inc. reseller and how would developing this liaison enhance our business?



References: (Please supply only those you currently buy from on an open account basis as well as current banking information)

1. Company _____ Contact _____
Address, City, State, Providence, Country & Postal Code _____

Phone _____ Fax _____ E-mail _____

2. Company _____ Contact _____
Address, City, State, Providence, Country Postal Code _____

Phone _____ Fax _____ E-mail _____

3. Company _____ Contact _____
Address, City, State, Providence, Country Postal Code _____

Phone _____ Fax _____ E-mail _____

4. Bank Name _____ Acct # _____ Contact _____
Address, City, State, Providence, Country Postal Code _____

Phone _____ Fax _____ E-mail _____

Please attach the following:

- Company Profile
- Company Catalog
- Advertisements, brochures, descriptive literature
- Last 3-years of financial statements and tax returns

By signing this application you warrant the information contained herein is true and is the most accurate disclosure at said time. Signing this application does not bind the Applicant or Smith-Root, Inc. in a reseller agreement but it does initiate the reseller process. If the application is accepted per Board of Directors approval a contract will be sent to secure a reseller relationship between Smith-Root, Inc. and said company.

I/we hereby authorize Smith-Root, Inc. to contact any or all of the above references regarding our credit standing. By making this application for reseller, I/we hereby agree that all amounts are payable on or before the due date as shown on each invoice and if not paid on or before said date, are then delinquent. Further, I/we agree to pay finance charge of 1.5% per month (18% per annum) on all said delinquent amounts.

Whether or not reseller is extended, I/we agree to the above terms and the undersigned, both individually and in a representative capacity is/are liable for the payment of the account. I/we do further agree that if this matter is placed in the hands of an attorney for collection, or if collection is made through probate proceedings, to pay a reasonable amount in attorney's fees on both the principal and finance charge.

Signature _____ Date _____

Print Name _____ Title _____

When application is completed please fax to 360-573-2064 or mail to:

**Attn. Reseller Department
Smith-Root, Inc.
14014 NE Salmon Creek Avenue
Vancouver, WA. 98686 U.S.A.**

Privacy Policy: The information contained in this application is confidential in nature and may not be revealed or disclosed to any party without prior written notice or authorization from the applicant.