

MORGAN HILL, CA 95037 TEL: 408-776-3311 FAX: 408-778-0654 www.moujenswitch.com

Thank you for your interest in Moujen industrial products! We are a manufacturer of limit switches, push-button switches, micro switches, and numerous other electronic and industrial components. Our goal is to give you access to high quality and competitive products which will increase both your sells, and your profits. We pride ourselves on great customer service and timely delivery.

Please complete the below Distributor Application. Once your application has been approved, you will receive a New Distributor packet containing catalogs, pricing, cross references, etc. You have the option to purchase on credit card terms, or establishing a net 30 day account. Once you credit application is approved you will receive a Distributor Agreement to sign and your account will be established.

Orders may be emailed to <u>sales@moujenswitch.com</u> – all orders are acknowledged with price and delivery confirmation.

Completed Distributor Applications may be sent to: sales@moujenswitch.com

Completed Credit Applications may be sent to: accounting@moujenswitch.com

Thank you once again for your interest in Moujen products. We look forward to doing business with you!

Sincerely,

Your Moujen USA Team

MOUJEN USA Distributor Application

Company Information								
Business Name:						Date:		
Billing Address:					# of years at location			
City:		State:		Zip:	Zip:			
Shipping Address:				Same as	Billing A	ddress		
City:		State:		Zip:				
Phone #:		Fax #:		Website:	Website:			
Federal Tax ID #:			Sales Exempt Certificate #:					
President/Owner Name:	Phone	one #: Fax			Email:			
Purchasing Agent Name:	Phone #:		Fax #:	Fax #:		Email:		
Accounts Payable Contact Name: Phor		e #:	Fax #:		Email:			
Establishment Type:								
			# of Year	# of Years in Business:				
Sole Proprietorship Partnership								
Corporation Other:			Market or	Market or Trade Classification:				
# of Employees: Average Annual Sales:								
Do you currently sell electro-mechanical products to other distributor resellers?								
How do you primarily sell Internet (Website), Sales Reps (physically visit dealerships), Phone (Call Center) or Other?								
What geographic area(s) do you service?								
Which products are you interested in?								
How did you hear about us?								

If you would like to be setup with terms of Net 30, please fill out the below information. If terms are not desired, the account will be setup as prepaid. Visa and Mastercard are accepted.

Credit Application

Bank Information									
Bank Name:				Account #:					
Bank Address:		Phone	#:	Fax #:					
City:	State:			Zip:	L				
Trade References									
usiness Name:			Account #:						
Business Address:		Phone #	:	Fax #:					
City:	State:	Zip:		Email:	ail:				
Business Name:	Account #:								
Business Address:			Phone	#:	Fax #:				
City:	State:	Zip:		Email:					
usiness Name:			Account #:						
Business Address:		Phone #:		Fax #:					
City:	State:	Zip:		Email:					
Business Name:			Accoun	t #:					
Business Address:	Phone #:		Fax #:						
City:	State: Zip:		Email:						
I, the undersigned individual, authorize Note references to obtain credit information. It certify that the above information is contained to the contained to t	also authoriz nplete and tru	e the above e.	bank/trade	references rel	ease credit information.				
Authorized Signature:			Date: _						
Title:									