



BERG TOYS SA SOUTH AFRICA

BUSINESS APPLICATION: DEALER / AGENT

PERSONAL INFORMATION

Name: _____

Address: _____

ID No: _____

Tel: (W) _____ Cell: _____

E-Mail: _____ Fax: _____

FINANCIAL

How much capital can you allocate to start this business? R _____

Do you plan to have a partner? _____

If so, will your partner be active? _____

EMPLOYMENT HISTORY

Kindly attach a resumé of your qualifications, previous employers, working experience and references in order to enable us to make a fair decision.

OBJECTIVES

Why are you interested in this particular business? _____

What strategies do you have for making a success of the business? _____

Please visit www.pedalgokarts.co.za to view all products. Tell us how you would like to do business with us i.e. to become a **Dealer** or to start a **rental** business, full-time/part time etc. _____



What do you consider your best attributes? _____

BUSINESS PACKAGES

List your preferred products and the amount/s of each product you wish to include in your business package.

BUSINESS AREA

Please indicate your preferred area of distribution in numerical order:
(1 = most preferred; 8 = least preferred etc.)

Western Cape: _____ Gauteng: _____ Kwa Zulu Natal: _____
Eastern Cape: _____ Free State: _____ Mpumalanga: _____
Zimbabwe _____ Botswana _____ Limpopo _____

Do there appear any concerns/enquiries you have about our distribution business? If so, kindly raise your concerns/enquiries:

Signature: Applicant

Date

I certify that the enclosed information as provided is complete and correct.