

Independent Sales Representative Application Form

Unimat Industries, LLC

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| Contact Name: | | | |
|-----------------------------|---|------------------------|--------------|
| | | | |
| | City: | | Zip: |
| Phone #: | Mobile #: | Fax #: | |
| E-mail: | Website: | | |
| How long in business: | | | |
| Currently sell Floor Mat pr | oducts: YesNo If Yes (pl | ease answer following | 4 questions) |
| Brands: | | | |
| Products: | | | |
| How long: | | | |
| Monthly Sales (USD) by p | roduct line: | | |
| Principal Clients: | | | |
| Other Product Lines you o | currently sell: | | |
| | | | |
| | | | |
| Monthly Sales (USD) by p | roduct line: | | |
| Provide a detailed descrip | tion of the geographic territory you so | eek for Unimat product | S: |
| | | | |
| | | | |
| Signature of Applicant: | | D | ate: |