

*Dear Applicant:*

*Thank you for expressing an interest in becoming a distributor for MÜLLER<sup>TM</sup> products.*

*For your convenience, please find the enclosed questionnaire, which after careful consideration, you may wish to fill out and return to our attention along with your trial order.*

*Sincerely,  
Sales Department  
Müller Brakes America Inc.*

## Benefits of Exclusivity License

Benefit type	Exclusive Master Distribution License	Semi-Exclusive Distribution License	Authorized Reseller License
Discount on Price List	Tier 1: <b>15%</b>	Tier 2: <b>10%</b>	Tier 3: <b>5%</b>
Marketing Budget (Cash Back) *	<b>3%</b>	<b>2%</b>	<b>1%</b>
FREE shipping to seaport	✓	✓	✓ <small>Depends on order volume</small>
Marketing Support (Design of banner, brochure, ...)	✓	✓	✓
FREE seasonal promotional items	✓	✓	✓
Trade show & Expo VIP badge	✓	✓	✓
Cooperate executive yearly gift (for director)	✓	✓	-
FREE packaging and labeling customization	✓	✓	-
Priority in production for orders received at the same time	Priority 1	Priority 2	Priority 3

**\* Marketing Budget (cash back):**

Upon request of Dealer, Muller Brakes agrees to pay up to 3% credit on all orders which are paid 100% in full and are not delivered more than 90 days ago (According to delivery date on Bill of Lading) as "Marketing Budget" to promote and advertise MULLER brand only on TV, Radio, Billboards or Magazine. The Dealer shall obtain the prior written approval of Muller Brakes for all marketing & advertising materials relating to the MULLER BRAKES AMERICA INC. prior to their production and dissemination. Muller Brakes shall not be required to pay for any marketing or advertising materials invoices which are older than three months or which are not approved by Muller Brakes in advance of their production.

**QUESTIONNAIRE TO PROSPECTIVE MÜLLER BRAKES AMERICA INC.**  
**DISTRIBUTORS**

**Müller Brakes America Inc. Mission Statement:**

Müller Brakes America Inc. is committed to fully understanding and meeting the requirements of its customers. We realize that each of us, along with our customers and suppliers, play a vitally important role in the process of improving how we fulfill this commitment.

For every product, service or solution we offer, we strive to continually monitor and anticipate our customers' changing needs. This enables us to consistently meet their specific requirements and deliver a level of quality that leaves them delighted with their decision to do business with Müller Brakes America Inc.

Please review and complete the form below, and return it to Müller Brakes America Inc. for careful consideration. The following is a list of mandatory requirements and expectations at Müller Brakes America Inc. in order to become a distributor.

Company Name \_\_\_\_\_

Address, Country \_\_\_\_\_

Contact Name \_\_\_\_\_

We would like to apply for: (Mark only one)

1.  **Exclusive Master Distribution License:** This Exclusive License is designed for large size cooperation with large volume of annual purchase. It's mandatory to have an active and organized distribution networks in the region which you apply for. There is no limit for minimum annual purchase commitment however this number will be set based on a few factors such as: GDP & population of country, number of cars.
2.  **Semi-Exclusive Distribution License:** Suitable for Medium Size companies with annual purchase more than \$250K to obtain the exclusive right of distribution in a specific country. This License will grant an "Exclusive" right of distribution only for a city or small region. (Not the whole country)
3.  **Authorized Reseller License:** This None-Exclusive License is Suitable for smaller companies with annual purchase between \$50,000 to \$100,000 USD.

**NOTE1: Please see tables on last page of this application showing BENEFITS of each type of above license.**

**NOTE2: A refundable security deposit equal to 5% of annual purchase commitment is required to secure the agreements. The security deposit will be refunded back once the dealer has successfully fulfilled the anticipated annual purchase commitment.**

**TOTAL ANTICIPATED ANNUAL MÜLLER BRAKES AMERICA INC. SALES**  
**\$ \_\_\_\_\_/USD**

We would like to distribute: (Check only one. If you apply for more than one product, you must increase your annual purchase volume.)

- MÜLLER<sup>TM</sup> Brake Pads
- MÜLLER<sup>TM</sup> Disc Brake Rotors
- MÜLLER<sup>TM</sup> Brake Fluid

1. Müller Brakes America Inc. requires distributors to have and maintain their own sales force, as well as standard product inventory.

I understand and agree to terms listed above

2. Müller Brakes America Inc. requires all distributors to provide sales trace data in either a spreadsheet format every 6 months. These traces must be transmitted electronically to Müller Brakes America Inc. email.

I understand and agree to terms listed above

3. Describe the geographical and environmental conditions of the area you normally and regularly sell in.

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Describe your business model (sales distribution):

# of Reps		% of Total Sales
_____	Field-Based Reps	_____
_____	Inside Sales Reps	_____
	Internet Sales	_____

4. List the items/parts you are currently successfully selling (or plan to sell) including:

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List of other auto parts companies you currently buy from:

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Müller Brakes America Inc.'s decision on your request, of course, will not necessarily be based on and limited to the information above, and may well have to include other considerations, but the above information will be very helpful in arriving at our decision.

**CONTACT INFORMATION FOR MÜLLER BRAKES AMERICA INC.  
DISTRIBUTORS APPLICANT**

**EXACT NAME OF BUSINESS** \_\_\_\_\_

**LEGAL STATUS:**   \_\_\_ PROPRIETORSHIP                           \_\_\_ PARTNERSHIP  
\_\_\_ CORPORATION                   \_\_\_ LIMITED LIABILITY COMPANY  
\_\_\_ LIMITED LIABILITY PARTNERSHIP

**STATE OF INCORPORATION OR REGISTRATION OF PARTNERSHIP:** \_\_\_\_\_

**NAME AND ADDRESS OF REGISTERED AGENT:**

\_\_\_\_\_

**LIST ALL OWNERS, PARTNERS, OR CORPORATE OFFICERS (and titles), THEIR BUSINESS ADDRESSES, RESIDENCE ADDRESSES, PHONE NUMBERS AND SOCIAL SECURITY NUMBERS:**

\_\_\_\_\_

\_\_\_\_\_

You, personally, and as agent for the company (entity), hereby authorize Müller Brakes America Inc. to contact and investigate the references listed, as well as all other information obtained as a result of such investigation.

**YOU CERTIFY THAT ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION AND ANY ATTACHMENTS, GIVEN FOR THE PURPOSE OF PROSPECTIVE MÜLLER BRAKES AMERICA INC. DISTRIBUTORSHIP, IS TRUE AND CORRECT TO THE BEST OF YOUR KNOWLEDGE.**

DATE: \_\_\_\_\_

Name of Company (Entity)

\_\_\_\_\_

Owner/Partner/President (Please print)

\_\_\_\_\_

Signature of the Name of Above