

# CLEAR CONNECT

## DISTRIBUTORS

### Company Information

Contact Name

Business Owner's Name

Date Established

Business Name (if subsidiary, name of parent company)

Tax ID No.

D&B No.

Business Address (street, city, postal code, country)

Shipping Address

Loading Dock Y/N?

Phone Number

Mobile Number

Territory Desired (counties)

Email Address

Company Web Address

Type of Business

Beverage  
Distributor

Grocery /  
Wholesale

Export /  
Import

Primary Product

What other convenience products do you distribute?

Sales Volume

.....

Financial Data

Sales Volume:

Number of Employees:

Additional Comments

Signature: