

RESELLER APPLICATION

Account Number
(For Office Use Only)

Will you be reselling the product that you purchase from UMAX.com ? Yes No
If "No", **stop** here. If yes, **please fax your reseller's certificate with this application.**

[DOCUMENT MUST BE FULLY COMPLETED BEFORE AN ACCOUNT IS OPENED AND PRICING QUOTED]

DESCRIPTION OF BUSINESS (Please type or print)

Date business established: _____ Length of time at current address: Years _____ Months _____

This company is a (check one): C-Corp, State of Incorporation _____ S-Corp, State of Incorporation _____
 Sole Proprietorship Partnership LLC (If LLC, must enclose **Articles of Organization**)

Ownership: Public Private **Federal Tax ID Number** _____

Is there a parent corp. or subsidiary? Parent Subsidiary Parent or Subsidiary name _____

Legal Business Name – As it appears on business license **(Required)**

Officer's/Owner's Name **(Required)**

Business Trade Name – DBA **(Required if using DBA name)**

Title & E- Mail Address **(Required)**

Business Street Address – Bill To **(Required)**

Officer's/Owner's Name **(Required)**

City, State, Zip Code County & Country

Title & E- Mail Address **(Required)**

Business Phone Number(s) (No 1-800 or cell phone numbers)

Authorized Purchaser(s) **(Required)**

Business Fax Number **(Required)**

*In order to purchase UMAX products on line, please provide **one** e-mail address. This e-mail address should be used as your login **E-mail Address** and to communicate with Techville, Inc./UMAX.com:*

Authorized Purchaser(s)

E- Mail Address **(Required)**

SHIPPING ADDRESS (If more than one, please attach list)

Authorized Purchaser(s)

City, State, Zip Code County & Country

TERMS REQUESTED: PREPAID (Wire Transfer, ACH)
 CREDIT CARD (American Express, MasterCard, & Visa only)
 NET TERMS – Credit Line Requested \$ _____ (Please attach financial statement for 2 years)

TRADE REFERENCES* (Related industry purchases during the pass 12 months)

Name Address Telephone # Account #

Name Address Telephone # Account #

BANK REFERENCES* – PLEASE COMPLETE FULLY (If more than one, please attach list)

Bank Name Account Officer's Name Checking Account Number

Address (Street, City, State, Zip Code, & Country) Savings Account Number

Telephone Number Fax Number Loan Number

***BANK AND TRADE REFERENCES MUST BE COMPLETED TO BE CONSIDERED FOR NET TERMS**

Applicant hereby agrees to the foregoing and authorizes the release of credit and banking information to Techville, Inc. by the references listed on this application. The following must be completed in order to have an account established with Techville, Inc.:

Owner/Partner/Corporate Officer Name – Please Print **(Required)**

Title **(Required)**

Owner/Partner/Corporate Officer Signature **(Required)**

As of this _____ day of _____, 20_____
(Required)

RESELLER PROFILE

Does your company have an internet site? If so, please list your web address here: _____

To better understand the special needs of your company, please answer the following questions.

1. Which category best describes your company's main business focus?

- | | | | |
|------------------------------------------------------|----------------------------------------------------|------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Alternate Consumer Channels | <input type="checkbox"/> Direct Marketer | <input type="checkbox"/> Manufacturer | <input type="checkbox"/> Telecommunications |
| <input type="checkbox"/> Computer Superstore | <input type="checkbox"/> Distributor | <input type="checkbox"/> Mass Merchant | <input type="checkbox"/> VAR/Systems Consultant |
| <input type="checkbox"/> Consumer Electronics | <input type="checkbox"/> Educational Retailer | <input type="checkbox"/> OEM | <input type="checkbox"/> Warehouse Club |
| <input type="checkbox"/> Corporate Reseller | <input type="checkbox"/> Exporter | <input type="checkbox"/> Office Products Store | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Dealer | <input type="checkbox"/> Internet Service Provider | <input type="checkbox"/> Software Only | |

2. If you are a VAR, which of the following best describes your company's reseller activities? (Check one)

- | | | | |
|------------------------------------------|-----------------------------------------------------------|---------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Application VAR | <input type="checkbox"/> Interconnect VAR | <input type="checkbox"/> Systems Integrator | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Contractor | <input type="checkbox"/> Network Integrator/Technical VAR | <input type="checkbox"/> Telephone Company | |

3. Which category best describes your company's ownership affiliation? (Check one)

- | | |
|----------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Affiliated with Franchise Group | <input type="checkbox"/> Member of Franchise Group |
| <input type="checkbox"/> Independent Reseller | <input type="checkbox"/> Owner-Operated Chain Location |

4. On average, which of the following best describes your company's total monthly computer purchases through all sources? (Check one)

- | | | | |
|-----------------------------------------------|-------------------------------------------------|-------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Less than \$ 3,000 | <input type="checkbox"/> \$ 25,000 -- \$ 49,999 | <input type="checkbox"/> \$150,000 -- \$249,999 | <input type="checkbox"/> \$1,000,000 or more |
| <input type="checkbox"/> \$ 3,000 -- \$ 4,999 | <input type="checkbox"/> \$ 50,000 -- \$ 74,999 | <input type="checkbox"/> \$250,000 -- \$499,999 | <input type="checkbox"/> Unavailable |
| <input type="checkbox"/> \$ 5,000 -- \$ 9,999 | <input type="checkbox"/> \$ 75,000 -- \$ 99,999 | <input type="checkbox"/> \$500,000 -- \$749,999 | |
| <input type="checkbox"/> \$10,000 -- \$24,999 | <input type="checkbox"/> \$100,000 -- \$149,999 | <input type="checkbox"/> \$750,000 -- \$999,999 | |

5. How often do you plan on purchasing from Umax? (Check one)

- | | | | | |
|----------------------------------------------------------------------------|----------------------------------------|--------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> Never, Account is for Pricing & Availability Only | <input type="checkbox"/> One Time Only | <input type="checkbox"/> Daily | <input type="checkbox"/> Weekly | <input type="checkbox"/> Monthly |
|----------------------------------------------------------------------------|----------------------------------------|--------------------------------|---------------------------------|----------------------------------|

6. Which of the following manufacturers do you have authorized reseller agreements with, if any? (Please check all that apply & list authorization number)

- | | |
|-----------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> 3Com # _____ | <input type="checkbox"/> HandSpring # _____ |
| <input type="checkbox"/> Apple # _____ | <input type="checkbox"/> HP # _____ |
| <input type="checkbox"/> Cisco # _____ | <input type="checkbox"/> IBM # _____ |
| <input type="checkbox"/> Citrix # _____ | <input type="checkbox"/> Palm # _____ |
| <input type="checkbox"/> Compaq # _____ | <input type="checkbox"/> Other Vendor _____ # _____ |

7. Do you build your own clones? Yes No If yes, on average how many systems do you build per month? _____

8. What are the main vertical markets (end-users) on which your company focuses, if any? (Check main verticals & indicate proprietary software)

- | | | |
|-------------------------------------------------|----------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> Accounting Y N | <input type="checkbox"/> Financial Svcs. Y N | <input type="checkbox"/> None Y N |
| <input type="checkbox"/> CAD/CAM Y N | <input type="checkbox"/> Government Y N | <input type="checkbox"/> Printing/Publishing Y N |
| <input type="checkbox"/> Computer Telephony Y N | <input type="checkbox"/> Health Care Y N | <input type="checkbox"/> Remote Access/Mobile Y N |
| <input type="checkbox"/> Construction Y N | <input type="checkbox"/> Insurance Y N | <input type="checkbox"/> Retail/P.O.S. Y N |
| <input type="checkbox"/> Data Warehousing Y N | <input type="checkbox"/> Internet Y N | <input type="checkbox"/> Sales Automation Y N |
| <input type="checkbox"/> Digital Video Y N | <input type="checkbox"/> Legal Y N | <input type="checkbox"/> Wholesale Distribution Y N |
| <input type="checkbox"/> Document Imaging Y N | <input type="checkbox"/> Manufacturing Y N | <input type="checkbox"/> Video Teleconferencing Y N |
| <input type="checkbox"/> Education Y N | | |

9. What percentage of your sales is to the following markets? (Total should equal 100%)

- | | | |
|----------------------------------------------|--------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> Education _____% | <input type="checkbox"/> Government _____% | <input type="checkbox"/> Small/Medium Size Business (1-500 employees) _____% |
| <input type="checkbox"/> Fortune 1000 _____% | <input type="checkbox"/> Home Users _____% | <input type="checkbox"/> Other _____% |

10. How many people does your company employ? (Check one) 1-5 6-10 11-20 21-50 51-100 101+

11. What were your company's total gross sales last year? (Check one)

- | | | | |
|-------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Less than \$500,000 | <input type="checkbox"/> \$1,000,000 -- \$4,999,999 | <input type="checkbox"/> \$10,000,000 -- \$24,999,999 | <input type="checkbox"/> Unavailable |
| <input type="checkbox"/> \$500,000 -- \$999,999 | <input type="checkbox"/> \$5,000,000 -- \$9,999,999 | <input type="checkbox"/> \$25,000,000 or more | |

12. Are you currently a member of any other national sales & service organization where solution providers can share ideas, resources, & technologies in a non-compete environment? Yes No If yes, please list _____

13. Do you have at least two (2) sales representatives who focus on outbound sales efforts? Yes No

14. Which of the following service/technical authorizations do you currently hold?

- | | | | | | | |
|----------------------------------|---------------------------------|------------------------------------------|--------------------------------------|----------------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> 3Com | <input type="checkbox"/> Cisco | <input type="checkbox"/> Dell | <input type="checkbox"/> IBM | <input type="checkbox"/> Microsoft | <input type="checkbox"/> Novell | <input type="checkbox"/> Tektronix |
| <input type="checkbox"/> Apple | <input type="checkbox"/> Citrix | <input type="checkbox"/> Epson | <input type="checkbox"/> Lexmark | <input type="checkbox"/> NEC | <input type="checkbox"/> Okidata | <input type="checkbox"/> Toshiba |
| <input type="checkbox"/> Cabling | <input type="checkbox"/> Compaq | <input type="checkbox"/> Hewlett-Packard | <input type="checkbox"/> Lotus Notes | <input type="checkbox"/> Nortel/Bay Networks | <input type="checkbox"/> Panasonic | <input type="checkbox"/> Unix |

15. How are you currently offering IT services to your end-user customers?

- | | |
|------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Buy Direct from Manufacturer or National Service Provider | <input type="checkbox"/> Perform Yourself |
| <input type="checkbox"/> No Services are Currently Offered | <input type="checkbox"/> Purchase Through Distribution (ie. Ingram Micro, Tech Data, Synnex, Other) |

16. What IT services are you currently offering to your end-user customers?

- | | | |
|-----------------------------------------------------|-----------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Help Desk | <input type="checkbox"/> Network Management | <input type="checkbox"/> Other (Please list) _____ |
| <input type="checkbox"/> Installation/Configuration | <input type="checkbox"/> Warranty/Maintenance | |

TECHVILLE, INC.

Main Office: 11343 N. Central Expwy., Dallas Texas 75243
Tel: 214-739-7033 Fax: 214-739-7042

(PLEASE PRINT OR TYPE)

AGREE TO RELEASE BANK INFORMATION

BANK NAME : _____

BANK PHONE # : _____

BANK FAX # : _____

I HEREBY AUTHORIZE THE ABOVE BANK TO RELEASE INFORMATION RELATED
TO ACCOUNT NAME: _____ ACCOUNT NUMBER: _____
TO ASSIST UMAX TECHNOLOGIES, INC IN ESTABLISHING A LINE OF CREDIT.

COMPANY NAME : _____

AUTHORIZED SIGNATURE IN BANK: _____

TITLE : _____

DATE : _____