



SOUTHERN PRIDE DISTRIBUTING, LLC

P.O. BOX 354, 401 S MILL STREET
ALAMO, TENNESSEE 38001
PHONE: (731) 696-3175 FAX: (731) 696-3180



INTERNATIONAL DISTRIBUTOR APPLICATION

MINIMUM REQUIREMENTS

- Physical commercial business location.
- Minimum current model demonstration unit inventory of one (1) gas fired rotisserie, one (1) model SRG-400 and one (1) model SC-200 smoker.
- Minimum product inventory of three (3) gas and two (2) electric Southern Pride smokers.
- Minimum replacement parts inventory to adequately service assigned territory.
- Website displaying the Southern Pride product line.
- Minimum of \$1,000,000 in general liability insurance coverage.
- Sales requirements will be established for assigned territory. Minimum sales requirement is \$500,000.
- All business is conducted in US currency (\$).
- Preference will be given to companies with a test kitchen/demonstration area.

BUSINESS INFORMATION

Name of Business (d/b/a):			
Corporate Name (if diff. from above)		D & B #	
Years in Business:		Type of Business:	
Street Address:			
Billing Address:			
Business Phone #:		Fax #:	
		Website:	

NAME AND ADDRESS OF OFFICERS, OWNERS, OR OTHER RESPONSIBLE PARTIES

(1) Name:		Title:	
(2) Name:		Title:	
(3) Name:		Title:	
(4) Name:		Title:	

SALES AND MARKETING INFORMATION

Do you have a:	Showroom	<input type="checkbox"/>	Test Kitchen	<input type="checkbox"/>	Service Department	<input type="checkbox"/>	Number of Service Technicians	
How many sales people do you employ:								
List other brands sold:								
Describe desired market territory:								
Are you registered to collect sales tax in the above territory:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>				
Briefly describe your planned advertising and marketing strategy for Southern Pride products:								

Any additional comments:

Accepted applicants will be required to complete a Southern Pride Credit Application and Distributor Agreement (contract).

Please sign and return this to Southern Pride Distributing, LLC. Thank you for choosing Southern Pride Distributing, LLC and we look forward to serving you.

Signature of duly authorized Officer, Owner, Agent or Employee	Title

Name (printed)	Company Name	Date
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Return completed distributor application to Bret Robertson at bretr@sopride.com.

Internal Use Only:	Date Received:
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Approved By:	Date:
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