

AgriTab Corporation
DISTRIBUTOR QUESTIONNAIRE

Please complete and return this questionnaire as soon as possible. The information you provide will help us to better understand and service your business. All information kept is Confidential.

Company Name: _____ **Buyer:** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Shipping Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Fax:** _____ **Toll Free:** _____

Email: _____ **Website:** _____

1. **What is your sales region?** (check all that apply) (circle all applicable states)

- International (list countries) _____
- National
- West AK AZ CA CO HI ID MT NV OR WA UT WY
- Mid-West AR IA IL IN KS MI MN MO NE OH OK ND SD WI
- South AL FL GA LA MS NC NM SC TN TX
- East CT DC DE KY MA ME MD NH NY PA RI VA VT WV
- State
- Regional (list areas) _____
- City

2. **To what markets do you sell?** (check all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Wholesale Grower Nurseries | <input type="checkbox"/> Landscapers | <input type="checkbox"/> General Public |
| <input type="checkbox"/> Retail Garden Centers | <input type="checkbox"/> Landscape Supply Dealers | <input type="checkbox"/> Mail Order |
| <input type="checkbox"/> Retailers & Hardware | <input type="checkbox"/> Internet | <input type="checkbox"/> Other _____ |

3. **What means do you use to distribute products to your customers?** (check all that apply)

- | | | |
|---------------------------------------|--------------------------------|--------------------------------------|
| <input type="checkbox"/> Own Trucks | <input type="checkbox"/> UPS | <input type="checkbox"/> U.S. Mail |
| <input type="checkbox"/> LTL Carriers | <input type="checkbox"/> FedEx | <input type="checkbox"/> Other _____ |

4. **Which competing product lines are you currently selling?** (check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Pondtabbs™ & Landon™ | <input type="checkbox"/> Laguna® Spikes | <input type="checkbox"/> Jobes® Spikes |
| <input type="checkbox"/> TetraPond™ LilyGro | <input type="checkbox"/> Pond Care® | <input type="checkbox"/> Agriform® |
| <input type="checkbox"/> Highland Rim™ | <input type="checkbox"/> Nursery Pro™ | <input type="checkbox"/> Other _____ |

5. **Please list the AgriTab Corp. products you are interested in purchasing.**

6. **Please attach a separate sheet with the names and addresses of your outside sales reps.**

Please Fax to 1-800-398-3803 or Email to agritab@msn.com