



AUTHORIZED DEALER APPLICATION

(Please print legibly)

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Website: _____

Key Contact: _____ Cell: _____ E-Mail: _____

Alternate Contact: _____ Cell: _____ E-Mail: _____

Background Information: _____ Referred by: _____

What % of your business is related to the following:

Residential: _____ %
Commercial: _____ %

History of Revenue Growth:

Past fiscal year: \$ _____
Current fiscal year to date: \$ _____
Next 3 years projected average growth rate: _____

How is your business classified? Please check all that apply.

- Audio/Home Theater Dealer _____
- Builder _____
- Central Vacuum Dealer _____
- Electrical Contractor _____
- Home Automation Contractor _____
- Lighting Systems Dealer _____
- Security Systems Dealer _____
- Structured Cabling Contractor _____
- Systems Integrator _____
- Consultant _____
- Other, please specify: _____

Target Market:

Builders: _____ %
Homeowners: _____ %
Other: _____ %

Do you have established working relationships with:

Interior Designers: _____ Builders: _____
Architects: _____ Realtors: _____
Other: _____

How long has your company been in business? _____

What % of business is related to the following:

How long at the current address? _____

New home construction _____ %
Retro-fit _____ %
Multi-dwelling units _____ %
Apartments _____ %
Condominiums _____ %
Single family _____ %
Commercial _____ %
Other _____ %

Does your company have multiple locations? _____

Number of non administrative personnel? _____

Number of active service vehicles? _____

Principle geographic coverage (complete as is applicable):

Local: _____ mile radius of (city/st) _____

Regional: (specify the exact region(s) covered): _____

Interstate: (specify states covered): _____

Please list other manufacturers whose products your company is authorized to install: _____

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Qualifications, Training, Professional Affiliations:

Please state any training, certifications, professional licenses

Is your company an active member of any professional

Is your company willing to commit to a long-term relationship to promote and perform quality installations of Centralite Systems? _____

Commitments and Agreements

Centralite Systems, Inc. is committed to the highest standards of excellence in business practices and the design, manufacture, sale and installation of quality consumer electronic products. In pursuit of these goals, Centralite Systems will provide to its Authorized Dealers:

1. Installation documentation, training classes and/or physical first Installation field assistance, and telephone support.
2. Local sales, marketing, and design assistance
3. Help in developing sales and promotional materials
4. Support for local trade shows on a best effort basis
5. Demonstration kits and materials at a reasonable cost
6. Reasonable Model Home and Showcase home programs
7. Form a strong working relationship with the Authorized Dealer to build both companies' businesses

By means of this application and subject to its acceptance and approval, in writing, the applicant promises to:

1. Use its best efforts to sell and support Centralite's products (Minimum purchase requirement of 25,000 annually)
2. Conduct all business associated with Centralite in a manner which will in no way harm its market presence or reputation
3. Furnish, to the best of the Dealer's ability, quarterly forecasts of future sales of Centralite products
4. Protect and hold as confidential all Centralite intellectual property and trade secrets
5. Pay accounts in a timely manner in accordance with the specified terms
6. Specify Centralite products in every quote possible
7. Install all Centralite products in accordance with specifications and to the highest degree of industry standards
8. Provide warranty support for the five-year warranty period.
9. Form a strong working relationship with Centralite Systems to build both companies' businesses

Owner(s) & Officer(s) Information

1.) Name: _____ Title: _____ 2.) Name: _____ Title: _____

3.) Name: _____ Title: _____ 4.) Name: _____ Title: _____

I, _____, a duly authorized agent

(Print Name and Title)

of the applicant Company have read, understand and acknowledge the commitments of both parties hereto and, accordingly do hereby submit this Dealer a Program Application and the required Credit Application to

Applicant's Signature

Date