

DISTRIBUTOR PARTNER QUESTIONNAIRE

PLEASE NOTE BOB DALE GLOVES REQUIRES ALL DISTRIBUTOR PARTNERS TO MEET THE FOLLOWING PRE-QUALIFYING CRITERIA:

- + Minimum 24 months of being in business
- + Must operate a business as a distributor for an industry or a region
- + Must have sales of PPE and safety gloves

PLEASE ANSWER ALL OF THE FOLLOWING:				
Are you based in USA or Canada? (check appropriate box)				
USA	CANADA			
How did you hear about Bob Dale Gloves?				
BDG WEBSITE SOCIAL MEDIA		А ВО	B DALE EMPLOYEE	OTHER
Have you previously been an authorized BDG distributor?				
YES	NO			
How long have you been in business?				
Do you have a distribution/store location? How many locations do you have? Please list all.				
Are you currently buying through another vendor? Why are you switching?				
What glove brands do you currently carry?				
Are there specific BDG® gloves you would like to carry?				
What is your estimated yearly glove purchase per year? (check appropriate box)				
UNDER 50,000	50,000-100,000	100,000-250,000	OVER 250,000	
What are your target industries for PPE?				
Are you a part of a buying group? If yes, which one?				
Are you okay with BDG® policy for new distributor? (check appropriate box) We require a minimum opening order of \$1200 and it must be submitted within the first 30 days of activation.				
YES	ning order of \$1200 and i	ι must de sudmitted Withii	i lie iirst 30 days ot activation.	
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Submit completed forms to customerservice@bobdalegloves.com for review. Please allow up to 14 business days for a response.