

Dear Applicant:

Thank you for expressing an interest in becoming a distributor for HARDEX® products. For your convenience, please find the enclosed questionnaire, which after careful consideration, you may wish to fill out and return to our attention along with your trial order.

*Sincerely,
Sales Department
Hardex Brakes Canada*

HARDEX BRAKES CORP.

522-999 Canada Place, Vancouver, BC V6C 3T4, Canada
Office: +1.778.945.0222 | Toll Free: +1.888.909.0808
web: www.hardex.com | email: sales@hardex.ca

FO-39-2, 1 Aug 2024

QUESTIONNAIRE TO PROSPECTIVE HARDEX BRAKES CORP. DISTRIBUTORS

Hardex Brakes Corp Mission Statement:

Hardex Brakes Corp is committed to fully understanding and meeting the requirements of its customers. We realize that each of us, along with our customers and suppliers, play a vitally important role in the process of improving how we fulfill this commitment.

For every product, service or solution we offer, we strive to continually monitor and anticipate our customers' changing needs. This enables us to consistently meet their specific requirements and deliver a level of quality that leaves them delighted with their decision to do business with Hardex Brakes Corp.

Please review and complete the form below and return it to Hardex Brakes Corp for careful consideration. The following is a list of mandatory requirements and expectations at Hardex Brakes Corp in order to become a distributor.

Company Name _____

Address, Country _____

Contact Name _____

We would like to apply for: (Mark only one)

Dealer License: Suitable for smaller companies with minimum annual purchase of \$50,000 USD.

Exclusive License: Suitable for bigger companies with annual large volume purchase. (You should offer based on the population & number of cars in that country)

TOTAL ANTICIPATED ANNUAL HARDEX BRAKES CORP SALES

\$ _____/USD

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We would like to distribute: (Check only one. If you apply for more than one product, you have to increase your annual purchase volume.)

HARDEX® Brake Pads (Passenger cars & SUVs)

- PREMIUM METALLIC _ HARDEX HSB
- PREMIUM CERAMIC _ HARDEX HCB
- PREMIUM DYNAMIC (Ceramic with Carbon Fiber)_ HARDEX HDB
- ENERGY _ Gold _ HARDEX EGB
- ENERGY _ Platinum _ HARDEX EPB
- X-SERIES (Metallic Formula) _ HARDEX HXS
- GREENX _ HARDEX HGB (NEW) _ in Ceramic category _ Copper-Free
- HIGH PERFORMANCE _ HARDEX HPB (NEW) _ Severe Duty formula_ Fleet cars

HARDEX® Brake Shoes (Passenger cars & SUVs)

HARDEX® Brake CV Pads (Commercial Vehicles & Trucks)

HARDEX® Brake Linings (Commercial Vehicles & Trucks)

1. Hardex Brakes Corp requires distributors to have and maintain their own sales force, as well as standard product inventory.

I understand and agree to terms listed above

2. Hardex Brakes Corp requires all distributors to provide sales trace data in a spreadsheet format every 6 months. These traces must be transmitted electronically to Hardex Brakes Corp email.

I understand and agree to terms listed above

3. Describe the geographical and environmental conditions of the area you normally and regularly sell in.

Describe your business model (sales distribution):

<u># Of Reps</u>		<u>% of Total Sales</u>
_____	Field-Based Reps	_____
_____	Inside Sales Reps	_____
_____	Internet Sales	_____

4. List the items/parts you are currently successfully selling (or plan to sell) including:

HARDEX BRAKES CORP.

List other auto parts companies you currently buy from:

Hardex Brakes Corp's decision on your request, of course, will not necessarily be based on and limited to the information above, and may well have to include other considerations, but the above information will be very helpful in arriving at our decision.

CONTACT INFORMATION FOR HARDEX BRAKES CORP DISTRIBUTORS APPLICANT

EXACT NAME OF BUSINESS

LEGAL STATUS: PROPRIETORSHIP PARTNERSHIP
 CORPORATION LIMITED LIABILITY COMPANY LIMITED LIABILITY PARTNERSHIP

STATE OF INCORPORATION OR REGISTRATION OF PARTNERSHIP: _____

NAME AND ADDRESS OF REGISTERED AGENT:

LIST ALL OWNERS, PARTNERS, OR CORPORATE OFFICERS (and titles), THEIR BUSINESS ADDRESSES, RESIDENCE ADDRESSES, PHONE NUMBERS AND SOCIAL SECURITY NUMBERS:

You, personally, and as agent for the company (entity), hereby authorize Hardex Brakes Corp. to contact and investigate the references listed, as well as all other information obtained as a result of such investigation.

YOU CERTIFY THAT ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION AND ANY ATTACHMENTS, GIVEN FOR THE PURPOSE OF PROSPECTIVE HARDEX BRAKES CORP DISTRIBUTORSHIP, IS TRUE AND CORRECT TO THE BEST OF YOUR KNOWLEDGE.

DATED: _____

Name of Company (Entity)

Owner/Partner/President (Please print)

Signature of the Name of Above