



DIODE LASER CONCEPTS, INC.
www.diodelaserconcepts.com

ISO 9001 Registered

Reliable Diode Laser Modules

(541) 773-5321

Prospective Representative Questionnaire

Company Name:

Street Address:

City:

Country:

Postal Code:

Main Telephone Number:

Other Telephone Numbers:

Fax Number:

Email address:

Primary contact name and title:

Company Website Address:

Location of other offices:

Countries/regions/areas where you sell:

Total annual turnover

% from diode lasers?

% from all laser products?

Other major principals and products:

Principals (list)

Products (list)



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1. **What are the technical credentials of your main personnel?:
(Please list name and applicable credentials)**

In General Management?

In Sales?

In Applications and Support?

2. **What is your sales company's experience with diode lasers?**

With other laser products?

3. **What methods of product promotion do you use?**

Which is the most effective?

4. **What is the number of personnel in:**

General Management: Sales: Technical: Admin:

5. **What knowledge do you have of diode laser applications and markets in your sales area?**



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What are some of the major applications?

Who are the potential users?

6. **What is your best estimate of the annual size of the diode laser market in your sales area in your currency?**

7. **What are the major trade shows you attend – at which do you exhibit?**

8. **Do you publish a product catalog? Please send us a copy.**

How often?