



## Project Request Form – international companies seeking to enter the Australia/NZ Market

Please complete this profile electronically and return it via email to [info@foley.net.au](mailto:info@foley.net.au), or by fax to +61 2 9229 8585. If any of the requested information is not available or not applicable, insert N/A. Feel free to contact us if you have any questions. Thank you.

<b>Company Name</b>		<b>Website</b>
<b>Contact Name and Title</b>		
<b>Address</b>		
<b>Telephone</b>	<b>Fax</b>	<b>Email</b>
<b>Year Established</b>	<b>Number of Employees</b>	<b>International Sales (%)</b>

Please check the services in which you are interested:

	<b>Market Overview Study</b>	<b>Distributor Search</b>
<b>Australia</b>		
<b>New Zealand</b>		

**Product Description: Please briefly describe your product or service. Include the unique features and market position of your products.**

**In relation to your US and foreign competitors, how are your products priced?**

High end of the market

Mid range of the market

Lower end of the market

An average sale to our customers would be valued at about \$ \_\_\_\_\_

**Please list your top 4 current export markets.**

1.	3.
2.	4.

**Who are the end users of your products/services?**

1.	3.
2.	4.

**Who are your major customers?**

1.	3.
2.	4.

**Who are your major competitors (U.S. and/or foreign)?**

1.	3.
2.	4.

**How are you currently selling in the U.S.?**

<input type="checkbox"/> Through Our Own Sales Force	<input type="checkbox"/> Through distributors
<input type="checkbox"/> Through Wholesalers	<input type="checkbox"/> Direct to End-Users
<input type="checkbox"/> Other, please describe:	

**Market Entry Strategy**

<b>Describe the method(s) you plan to use to enter the market:</b>		
<input type="checkbox"/> Representative	<input type="checkbox"/> License	<input type="checkbox"/> Wholesaler
<input type="checkbox"/> Distributor	<input type="checkbox"/> Agent	<input type="checkbox"/> Retailer
<input type="checkbox"/> Joint Venture Partner	<input type="checkbox"/> Direct Sales	
<input type="checkbox"/> Other, please describe _____		
<b>Please list any specific or special requirements prospective representatives must meet with respect to physical facilities, technical capabilities, financial strength, staff representation, complementary product lines, or other factors:</b>		

Please list any specific firms that should not be contacted such as firms with whom you have existing contracts, firms who may represent your competitors, former agents/distributors, etc.

Please list companies, organizations, or people you already know you would like to be contacted in the market.

What are your expectations for this market? (Please describe your short- and mid-term expectations).

State any additional information you think may be helpful in our search.

Please list any additional questions you may have about this market.