

## INSIDE ENDOSCOPE DEALER APPLICATION

Company			
Address		Telephone	
		Facsimile	
		Website	

M.D. / Principle	T:		E:	
Main Contact	T:		E:	
Accounts	T:		E:	

Main Products	
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*Please mark with a X all that apply*

Main Clients		Surgeries		Hospitals		Training Estab		Laboratories
		NHS		Private		Franchise		Military

		Micrometers		Scalers
		Operating Lights		Water Distillers
		Autoclaves		Turbine Handpieces

	I do NOT purchase from Faro
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*Dealers registered with Phoenix will be able to purchase at a Trade discount and have access if required to Phoenix Training / Installation services*

	I am interested in being an INSIDE Dealer
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*The Referral scheme is for those Dealers who wish to refer a client to Phoenix and receive a commission payment if a sale is successful.*

	I am interested in the INSIDE Referral Scheme
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	Please call me to discuss further
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	Please call me to arrange a meeting
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	I am NOT interested in the INSIDE system
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Company No	
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VAT No	
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Bank		Account Name	
Address		Sort Code	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>
		Account No	
		Ref (if applicable)	

Signature	
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Date	
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