



# PHAZZER ENQUIRY FORM

We thank you for your recent enquiry to represent PhaZZer and our products. Please answer in detail the questions below so we may assess you and or your company's capabilities to represent PhaZZer while being able to offer your customers the upmost proper and professional technical support, training and administrative services we require all agents to perform.

1. Please provide your full name, and those of your fellow partners or Directors.

2. Name of your Company.

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3. Your Position within the Company.

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4. Full address of the Company and/or the office address your work from. We do not recognize PO Boxes, mail-drops, accommodation addresses or other forms of non-domicile address.

5. Company web site URL.

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6. Your direct email address.

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7. The Country or Territory you wish to represent PhaZZer within.

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8. Do you or your company have any knowledge on selling, representing, supporting and/or training CEW devices – PhaZZer needs to fully understand your skills levels and ability?

Yes                      No

9. Have you been or are you presently commercially or otherwise connected with any other CEW device or Manufacturer?

Yes                      No

If Yes:                      How Long: \_\_\_\_\_ Device Name: \_\_\_\_\_

Company/Supplier: \_\_\_\_\_

CEW Annual Sales: USD \_\_\_\_\_

10. How long has your Company been in business?

11. Please provide some form of proof that your Company has traded with police, prisons, military and/or other official agencies that require CEW's.

12. What laws control the import of CEW's into your Country, or that of your client?

13. What laws control the use and deployment of CEW's in your/client's Country?

14. If CEW's are a Controlled device, please provide proof that you have the necessary licenses and permits to import, or show evidence that your Company would be in a position to obtain those permits/licenses.

15. Please list three significant recent orders your Company has received from either your national police, prisons, military or any other major agency – This list is to include the date of that order, total value and list the products sold.

16. Please indicate your annual turnover in US dollars.

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17. How many staff does your Company employ?

18. Do you train customers?

Yes                      No

19. If you do NOT train, is your Company willing to train in the use, maintenance and safe deployment of the PhaZZer CEW? Details of our Instructor Courses are accessible via our web site [www.PhazzerGlobal.com](http://www.PhazzerGlobal.com) under Training.

Yes                      No

20. Training is mandatory for all agents and representatives. Will you commit to either sending a person or persons to a designated area to train as a Master Instructors or have a PhaZZer trainer sent to train a person or persons as a Master Instructors?

Yes                      No

21. Please list and provide proof of Certification such as ISO 9000, SIA or other accreditation/s.

22. Please ask us any questions you wish about this Agent Questionnaire. The purpose of these questions is to determine your Company's suitability as a PhaZZer Agent, sub-agent or distributor, or acting as a broker for others/another. Under NDA we will need to know that name and country of that client. If you are a new or recently formed entity, please explain in full.

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When Completed please save and email this form back to [Sales@Phazzer.info](mailto:Sales@Phazzer.info)

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[Sales@Phazzer.info](mailto:Sales@Phazzer.info)