

Signal Inc., Show Up Division

2-6-8 Aoshinke Mino-city Osaka, 562-0024 Japan



DISTRIBUTORSHIP APPLICATION FORM

PLEASE FILL IN ENTRY COLUMN BELOW:

(* MUST BE FILLED)

COMPANY
NAME:

COUNTRY:

* Type of
business

* Year operating
since

* Business
location

* Name of the
president

* Main contact
person

Main business
partners

Proposed area of
coverage

Proposed amount
of investment per
year

* Corporate
Registration #:
TAX ID / EORI or
other if known.

Annual revenue

* SNS accounts:
FB, IG, X, TikTok, etc

* Company
website

APPLICATIONS ACCEPTED BY:

Email:

english@showup.jp

Name:

Rie Kumamoto, Oversea sales

*Please send your application form to above email address and person in charge.

Should you have additional comment, please write down below:

Distributorship procedure:

We will review the document and respond withing 10 business days since the submission of the application.
↓
Account to be registered.
↓
PO sheet to be distributed from us.
↓
PO to be received from the customer.
↓
Payment to be received from the customer.
↓
Ship the products.

Payment methods:

Advanced payment by bank wire transfer or PayPal account.
Transaction fee to be settled by your account.

Minimum order requirement:

JPY 500,000 / order

Shipment:

Distributer can designate a shipper or ask us about shipment methods.

DO NOT WRITE ANYTHING BELOW: OUR COMPANY to fill in internally.

REVIEWED BY:	Kenta Mano, General manager	DATE:
REVIEWED BY:	Yumi Mano, Director of Marketing	DATE: