

Please fax, email or mail completed Partner Application to:

Channel Programs
nAppliance Networks
540 Dado Street
San Jose, CA 95131, USA.
Fax: 408-943-8222
Email: sales@nappliance.com

Type of Company:

Sole Proprietorship		Limited Partnership/LLP	
Partnership		Corporation/LLC	

Company Information:

Company Name	
State, Province or Country of Incorporation	
Company URL	
Company Address	
City	
State or Province	
Postal Code	
Country	
Company Telephone Number	
Company Fax Number	

Years in business		Annual Revenue		# of Employees	
# of Locations		Office Locations			

Primary Contact Information:

Name	
Title	
Telephone Number	
Fax Number	
Email	

Secondary Contact Information:

Name	
Title	
Telephone Number	
Fax Number	
E-mail Address	

Networking/security certifications held by your technical employees (e.g., CNE, MCSP, CISSP):

TYPE OF CERTIFICATION	NUMBER OF EMPLOYEES CERTIFIED

Your Company's Primary Business Focus:

Number of Active Sales Accounts		Typical Customer's Size		Number of Customers Supported	
Do you offer technical support to customers?		Technical Support Hours			

What percentage of your sales is obtained from the following?

Enterprise _____% (Private Sector business over 5,000 Employees)

Mid Market _____% (Private Sector business between 1,000 – 5,000 employees)

SME _____% (Private Sector Business below 1,000 employees)

Federal Government _____% (Central Government agencies)

State and Local Government _____% (State/Province governments and subdivisions)

Education _____% (Educational Institutions at any level)

Other _____% _____

What nAppliance products are you most interested in selling?

____ Net Gateway nTMG

____ Net Gateway nTMGE

____ Net Gateway nUAG

____ Other, Please Specify _____

Main brands you sell:

Of the products you sell, name the THREE that produce the most revenue for you:

1.

2.

3.

Other security products & services you sell:

Partner Key Contacts:

Please provide the names of your Key personnel who will be responsible for various parts of the nAppliance Partnership			
Key Partner Manager (Manager of Relationship with nAppliance)			
Name			
Title			
E-mail		Phone	
Key Sales Contact (Lead Sale contact for nAppliance products)			
Name			
Title			
Email		Phone	
Key Technical Contact (Lead Technical Resource for nAppliance Products)			
Name			
Title			
Email		Phone	
Key Accounting Contact			
Name			
Title			
Email		Phone	
Additional Contact: (Optional)			
Name			
Title			
Email		Phone	

nAppliance Networks, Inc.

540 Dado Street, San Jose, CA 95131, USA

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