

HOMELAND SECURITY STRATEGIES GB, LTD.

Dealer Application

DATE: _____ COMMENCEMENT DATE: _____

NAME: _____ TITLE/POSITION: _____

COMPANY/ORGANIZATION: _____

ADDRESS: _____

CITY: _____ COUNTRY: _____ POSTAL CODE: _____

PHONE: _____ MOBILE: _____ FAX: _____

EMAIL: _____ WEBSITE: _____

YEARS IN BUSINESS: _____ NUMBER OF LOCATIONS: _____ NUMBER OF EMPLOYEES: _____

TYPE OF FACILITY: RETAIL _____ SHOWROOM _____ SERVICE _____ OTHER _____
Check all that apply

ANNUAL SALES: \$ _____

PROJECTED SALES: \$ _____

TYPES OF PRODUCTS CURRENTLY SOLD: _____

MANUFACTURERS CURRENTLY REPRESENTED: _____

CURRENT CUSTOMER BASE: _____

BANK REFERENCES: _____

TRADE REFERENCES: _____

HSS SALES PROJECTIONS FOR UPCOMING YEAR:

CARGO BOMB SCANNING SYSTEMS: \$ _____

CELLULAR INTERCEPT/MONITORING SYSTEMS: \$ _____

CELLULAR CONTROL SYSTEMS: \$ _____

RCIED (BOMB) JAMMING SYSTEMS: \$ _____

COMMUNICATIONS/CELLULAR JAMMING SYSTEMS: \$ _____

OTHER (please specify): _____

PLEASE ATTACH A PAGE(S) OUTLINING YOUR BUSINESS PLAN FOR MARKETING HSS SYSTEMS

CERTIFICATION

I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I AGREE THAT, UPON APPROVAL OF THIS APPLICATION, I WILL WIRE-TRANSFER THE TRAINING FEE OF GBP £10,000.00 (British Pounds Sterling) IN ORDER TO RESERVE THE TRAINING SESSION IN NEW YORK, LONDON OR LOCAL IN-COUNTRY .

Signature

Date

Bank Information

BANK: HSBC , 415 Madison Avenue, New York, NY, 10017, U.S.A.

SWIFT: MRMDUS33RTL

ABA#: 021001088

ACCOUNT#: 619769254

ACCOUNT NAME: Secure Wave Technologies, Ltd.

FAX THIS APPLICATION TO: +1-914-368-9729 OR EMAIL TO: alliance@secintel.com

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HSS use only

AFD# _____

Reviewed by: _____

Approved: _____

Date _____

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