

A.H. Harris Inc. Product Review Form

We recognize the importance of relationships and the investment that our mutual companies must make in order to be successful. For that reason, we have developed a selection process that will help us to properly evaluate opening relationships with new companies or expanding product offerings with our current vendors.

Utilization of the enclosed form will allow us to share necessary information with all of our divisions. This will help us to properly weigh market differences and opportunities. Additionally, we have established a Product Selection Group who will then evaluate the information you submit. They will then make a recommendation to our organization. This process will allow us to respond to your requests in a timely manner.

Please take a few minutes to fill out the enclosed forms and return them to me either by mail or by fax. Don't hesitate to call me with questions, concerns or comments.

Saul Mazur
Director of Marketing



VENDOR PROFILE FORM

Return to: Saul Mazur P.O. Box 311058, Newington, CT. 06131-1058

Phone: 860 – 665 - 9494

Fax: 860 – 665 - 9444

Date: _____

I. CORPORATE:

Name of Firm:

Business Hours:

Address:

Phone Number:

City, State, Zip Code:

Fax Number:

Contact Person:

E Mail Address:

II. MANUFACTURING FACILITIES:

Address:

Phone Number:

City, State, Zip Code:

Fax Number:

Contact Person:

E Mail Address:

III. PERSONNEL INFORMATION:

President – Chief Executive Officer:

Phone Number:

Sales/ Marketing Manager:

Phone Number:

Regional Sales Manager:

Phone Number:

Product Manager:

Phone Number:

Other:

Phone Number:



IV. REGIONAL SALES OFFICES:

Address: _____ Phone Number: _____

City, State, Zip Code: _____ Fax Number: _____

Contact Person(s): _____ E Mail Address: _____

Contact Person(s): _____ E Mail Address: _____

V. ADDITIONAL SALES OFFICES:

Address: _____ Phone Number: _____

City, State, Zip Code: _____ Fax Number: _____

Contact Person(s): _____ E Mail Address: _____

Contact Person(s): _____ E Mail Address: _____

**VI. CURRENT DISTRIBUTORS REPRESENTING THESE PRODUCTS
IN OUR MARKET AREA:**

A. Name of Firm: _____

Address: _____ Contact: _____

City, State, Zip: _____ Phone Number: _____

B. Name of Firm: _____

Address: _____ Contact: _____

City, State, Zip: _____ Phone Number: _____



PRODUCT REVIEW FORM

Products for consideration:

What specific value or benefit does your product bring to the market?

Who are the primary competitors in this market?

What is the unique selling proposition for your product?

What is your pricing strategy?

How is your pricing positioned regarding your competitors?

How will you position your product in our market area?



What better features, advantages and benefits do you offer over your competitors?

Outline pricing or in-place cost benefits over your competitors.

What resources (personnel and facilities) are you willing to allocate to the product?

What support do you expect from A.H. Harris?

How do you plan to take your product to the market?
(Specifier, Contractor, or Owner focused?)

What are your projected dollar volumes for this year and next for this product?

Do you currently sponsor co-op advertising, if not, will you?

A.H. Harris & Sons, Inc.



CONSTRUCTION SPECIALTIES
Since 1916

Other Comments:
