



## HP OEM Agreement Application

Dear Prospective OEM Partner,

This application is the first step in what we hope will be an easy process to become our OEM business partner. We ask you to complete and return this application to your HP Sales Representative.

In some countries and regions specific documentation might be required; this can include Country Participation Agreements, copy of Passports or other documentation.

If you have any questions, please contact your HP Sales Representative.

YOUR COMPANY INFORMATION (*=This is required as mandatory.)	
Legal Entity Name*	
Doing Business or Trading as Name*	
Local Language Name (if different from above)	
Company URL*	
Headquarter Physical Address* (PO Box or PMO are not acceptable)	Address Line 1: Address Line 2: City/Town: State/County: Zip/Postal Code:  Federal Tax ID, VAT ID: (or local country equivalent):
Company Profile	<p><u>Type of Company</u></p> <p>1. Form of Organization:</p> <p><input checked="" type="radio"/> Corporation   <input type="radio"/> Sole Proprietor</p> <p><input type="radio"/> Partnership   <input type="radio"/> Other</p> <p><input type="radio"/> Please provide your stock symbol (if applicable) <input type="text"/></p> <p><b>REQUIREMENT (for US companies only):</b> For all Inc., Corp. or LLC's, a <u>Certificate of Good Standing</u> for the state your company is registered in is required. If you are a Sole Proprietor, you must be registered with Dun and Bradstreet, which can be done for free at <a href="http://www.dnb.com/us/">http://www.dnb.com/us/</a>.</p> <p>2. Is your company owned by a parent company?</p> <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p>* <b>If yes</b>, please provide the name of the Parent Company.</p> <input type="text"/> Address Line 1:



	Address Line 2: City/Town: State/County: Zip/Postal Code:																		
<b>Estimated HP Product Activity</b>	What is your anticipated annual unit volume sale, by system platform type <table border="1" data-bbox="659 428 1187 1010"> <thead> <tr> <th data-bbox="659 428 933 527">HP Inc Products</th> <th data-bbox="933 428 1187 527">Estimated Annual Units to be Purchased</th> </tr> </thead> <tbody> <tr> <td data-bbox="659 527 933 583">Thin client</td> <td data-bbox="933 527 1187 583"></td> </tr> <tr> <td data-bbox="659 583 933 640">Printers</td> <td data-bbox="933 583 1187 640"></td> </tr> <tr> <td data-bbox="659 640 933 697">Workstation</td> <td data-bbox="933 640 1187 697"></td> </tr> <tr> <td data-bbox="659 697 933 753">Laptops</td> <td data-bbox="933 697 1187 753"></td> </tr> <tr> <td data-bbox="659 753 933 810">Desktops</td> <td data-bbox="933 753 1187 810"></td> </tr> <tr> <td data-bbox="659 810 933 867">Tablets</td> <td data-bbox="933 810 1187 867"></td> </tr> <tr> <td data-bbox="659 867 933 924">Retail Point of Sale Solutions</td> <td data-bbox="933 867 1187 924"></td> </tr> <tr> <td data-bbox="659 924 933 1010"></td> <td data-bbox="933 924 1187 1010"></td> </tr> </tbody> </table>	HP Inc Products	Estimated Annual Units to be Purchased	Thin client		Printers		Workstation		Laptops		Desktops		Tablets		Retail Point of Sale Solutions			
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<b>What is the address of the main purchasing location you will use to procure HP product(s)?</b>	<p>Please provide this information for each location where you will purchase HP products. Submit as many entries as required for each local country/ tax jurisdiction entity which is an affiliate that will place orders with HP. For multiple locations, <u>please attach a spreadsheet</u> with the location information listed.</p> <p>The contact name will be used to control access to web based proprietary information. A central contact or a unique contact per location may be used.</p> <table border="1" data-bbox="553 1228 1495 1732"> <tr> <td data-bbox="553 1228 982 1285">Legal Entity Name</td> <td data-bbox="982 1228 1495 1285"></td> </tr> <tr> <td data-bbox="553 1285 982 1341">Doing Business as Name</td> <td data-bbox="982 1285 1495 1341"></td> </tr> <tr> <td data-bbox="553 1341 982 1398">Physical Address of Affiliate</td> <td data-bbox="982 1341 1495 1398"></td> </tr> <tr> <td data-bbox="553 1398 982 1509">Entity/Location Specific Tax/ business Registration ID #</td> <td data-bbox="982 1398 1495 1509"></td> </tr> <tr> <td data-bbox="553 1509 982 1566">Contact's E-Mail Address</td> <td data-bbox="982 1509 1495 1566"></td> </tr> <tr> <td data-bbox="553 1566 982 1623">Contact's Phone #</td> <td data-bbox="982 1566 1495 1623"></td> </tr> <tr> <td data-bbox="553 1623 982 1732">Contact's Job Title</td> <td data-bbox="982 1623 1495 1732"></td> </tr> </table>	Legal Entity Name		Doing Business as Name		Physical Address of Affiliate		Entity/Location Specific Tax/ business Registration ID #		Contact's E-Mail Address		Contact's Phone #		Contact's Job Title					
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Contact's Phone #																			
Contact's Job Title																			
<b>OEM SOLUTION DESCRIPTION</b>																			
<b>Type of Solution</b>	Will the HP product be visible on your solution or will the HP product be embedded so that the HP brand will not be visible?  <input type="radio"/> HP Product will be visible (integrated solution)																		



	<input checked="" type="radio"/> HP Product will not be visible (embedded solution)
<b>BUSINESS CONTACTS</b>	
<b>Ethics and Compliance Officer Contact Information</b>	<p>Please provide us your Company's compliance officer, anti-corruption attorney, or representative with signatory authority to bind your company in legal, regulatory and compliance matters, including UK and US anti-bribery acts.</p> <p>First Name: Last Name: Title: E-Mail Address: Phone Number:</p> <p>Address (if different than provided above in Company Information):</p>
<b>Please note: you can mark this application as CONFIDENTIAL. This information is for internal HP purposes only and will not be shared.</b>	
<b>OEM Applicant Name</b>  <i>The OEM applicant will serve as the primary control point for program/pricing information.</i>	<p>First Name: Last Name: E-Mail address: Phone Number:</p>
<b>OEM Portal Administrator</b> <i>The portal administrator will have primary control of portal user access. You will receive instructions on how to access the portal once the contract is signed by HP.</i>	<p>First Name: Last Name: E-Mail address: Phone Number:</p>
<b>Date Submitted to HP</b>	

INFORMATION TO BE COMPLETED BY HP



**HP Account  
Contact &  
Contract  
Information**

Your HP account contact is responsible for escalations or special issues where the HP account team should be engaged.

HP OEM Sales Representative/Specialist: [click here to enter text](#)

E-Mail Address: [Click here to enter text](#)

Phone number: [Click here to enter text](#)

**OEM Buying  
Motion**

**Buying directly from HP**

**Buying through HP referred & approved OEM Distribution Partner/Reseller**

HP sales reps are responsible for informing OEM if any of the desired HP products require technical certification.