



Dear Potential Dealer:

Thank you for your interest in becoming an authorized dealer for MetroPCS.

**We are currently accepting applications from business professionals who are interested in becoming MetroPCS Dealers. Please note that only completed applications will be considered.**

Please complete the Potential Dealer Profile, and attach copies of the following:

- Articles of incorporation or organization
- Most recent financial statement signed by a certified accountant
- Three months of Bank Statements
- Business license
- Proof of insurance
- lease agreement or deed to property
- Please Sign the included **Mutual Non-Disclosure Agreement**

Mail all **completed** documentation to the address below, attention:

**Indirect Sales**  
**500 Amigo Court Suite 130**  
**Las Vegas, Nevada 89119**

Or send via email to: [vgsdealers@metropcs.com](mailto:vgsdealers@metropcs.com)

We thoroughly evaluate each application, with careful consideration being given to your store's proximity to existing/proposed MetroPCS dealers. Other determining factors include your status as an independent business, the number of carriers you represent, as well as your store's appearance. After we review your profile and documents, we will contact you for further discussion.

Again, thank you for your interest in MetroPCS.

MetroPCS Las Vegas



## Authorized Dealer Program Minimum Guidelines

### Location Guidelines

1. Dealer must have retail storefront presence including signage.
2. Dealer must have a current email address for communications from MetroPCS.
3. Dealer must have an operational fax machine for receipt of time sensitive information from MetroPCS.
4. Dealer location should be attractive, well kept, orderly and located in visible area.
5. Dealer must complete Dealer Application including bank and trade references and pass financial, background, and criminal history check.
6. Startup businesses must present business plan.
7. Requested location must be a minimum of 1 mile from nearest authorized MetroPCS location.

### Minimum Merchandising Standards

Dealer must display the following:

1. Approved MetroPCS signage/banner inside retail locations
2. Current coverage map provided by MetroPCS
3. MetroPCS literature regarding coverage and pricing
4. MetroPCS approved handsets
5. Dealer may not alter the metroPCS logo or recreate it without consent of metroPCS.
6. MetroPCS signage displayed on exterior of building.

### Training Standards

1. Dealer must have owner(s) as well as all sales personnel trained by MetroPCS Representative prior to initial launch of MetroPCS service.
2. Dealer's new hires must attend a MetroPCS training session prior to selling MetroPCS products & services.
3. Dealer should notify their MetroPCS Representative of all new hires in order to provide ongoing training.



**Potential Dealer Profile**

Date: \_\_\_\_\_

Name of Business: \_\_\_\_\_ DBA Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Requested Location Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_ Date opened/acquired: \_\_\_\_\_

(List any additional store locations on page 2)

Phone Number: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ Fax Number: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Primary Contact's Mobile Telephone Number: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_ Website: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Store/business owner: \_\_\_\_\_ % of ownership: \_\_\_\_\_

Owners/Partners: \_\_\_\_\_ % of ownership: \_\_\_\_\_

Leased or building owned in name of: \_\_\_\_\_

Business License in name of: \_\_\_\_\_

Insurance in name of: \_\_\_\_\_ Coverage's and Limits: \_\_\_\_\_

What is your primary type of business? \_\_\_\_\_

How many employees? \_\_\_\_\_ Other languages spoken: \_\_\_\_\_

Days & Hours of Operation: \_\_\_\_\_ Answering Machine \_\_ Yes \_\_ No

Other carriers sold:

AT&T \_\_ Yes \_\_ No Direct or Sub under which master dealer \_\_\_\_\_

Cingular \_\_ Yes \_\_ No Direct or Sub under which master dealer \_\_\_\_\_

Nextel \_\_ Yes \_\_ No Direct or Sub under which master dealer \_\_\_\_\_

Sprint \_\_ Yes \_\_ No Direct or Sub under which master dealer \_\_\_\_\_

TMobile \_\_ Yes \_\_ No Direct or Sub under which master dealer \_\_\_\_\_

Verizon \_\_ Yes \_\_ No Direct or Sub under which master dealer \_\_\_\_\_

Other \_\_ Yes \_\_ No Direct or Sub under which master dealer \_\_\_\_\_

What services or products do you sell? \_\_\_\_\_



Number of MetroPCS units expected to sell per Month: \_\_\_\_\_

Want to be a payment center: \_\_Yes \_\_ No      Do you advertise? \_\_ Yes \_\_No

Which advertising mediums? \_\_\_\_\_

Monthly Advertising Budget \_\_\_\_\_ Will you advertise MetroPCS? \_\_ Yes \_\_ No

Can you display a banner outside? \_\_\_\_\_Yes \_\_\_\_\_No

Are you interested in purchasing a MetroPCS Auth. Dealer Exterior sign for your store(s)? \_\_ Yes \_\_ No

Are you willing to dedicate at least 50% of your store space to metroPCS? \_\_ Yes \_\_ No

Please check all that apply:       Store Front       Kiosk       Direct Sales  
 Warehouse       E – Commerce       Flea Market

**Bank Reference**

Name of Bank: \_\_\_\_\_ Account #: \_\_\_\_\_

Additional Locations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I attest that the foregoing statements and answers are true and complete. I authorize metroPCS, Inc. and its related affiliated entities to investigate all statements contained in this application and to conduct a credit, background, and criminal history check on any and all individuals and business names associated with my company. I understand any misrepresentation or omission of the facts called for will constitute sufficient reason to cancel this application or, if I have been granted a dealership, to terminate my dealership.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name



**Return this completed application with copies of the following:**

- Articles of incorporation or organization
- Recent financial statement or balance sheet
- Current Certificate of Insurance coverage
- Current Business License
- Lease agreement or Deed to Property