

*Required information

Hikvision Dealer Partner Program Agreement

This agreement ("Agreement") establishes the Hikvision Dealer Partner Program ("Dealer Partner Program") between the following parties:

Hikvision USA Inc. 908 Canada Court City of Industry, CA 91748 "Hikvision"

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	nequired information
Company Name:*	
Address Line 1:*	
Address Line 2:	
City:*	
State:*	ZIP:*

The undersigned parties hereby agree to the following provisions as conditions of the Dealer Partner Program:

SECTION 1--Program Outline

- 1.1 The Dealer Partner Program will be named "Hikvision Dealer Partner Program", for the purpose of purchasing Hikvision USA surveillance products and accessories.
- 1.2 Dealer Partner Program will commence on the date listed above, and will automatically renew for one (1) year, based upon criteria being met per Section 2 below. Qualifying purchased will be reviewed by Hikvision USA on a quarterly basis to determine validity of renewal. Both parties may submit in writing, their intent to terminate said agreement with 30 day prior notice.

SECTION 2—Program Criteria

2.1 Dealer Partner is invited by Hikvision to participate in the Dealer Partner program with the net product purchase target amount of annually and will receive all program benefits as a currently outlined in the program documents.

[&]quot;Dealer Partner"



SECTION 3—Program Management

3.1 The Dealer Partner Program will be managed by Hikvision using correlated purchasing data from our approved distribution channel partners.

SECTION 4--Confidentiality

4.1 All information that involves the Dealer Partner Program, directly or indirectly, shall be considered Confidential. Neither company may share this Confidential Information with any third party without the written consent of both companies.

SECTION 5--Jurisdiction

5.1 This Agreement is subject to the laws and regulations of the state of California, as well as any applicable federal laws.

We, the undersigned, agree to all the provisions listed above, and sign this document of our own free will.

IN WITNESS WHEREOF, the Parties have caused this Agreement to be executed by their duly authorized representatives, as of the day and year latest written below.

*Required informat	Hikvision USA Inc.
Dealer Partner Company*	
Company Representative*	Company Representative
Signature	Signature
Date	Date
Preferred Distributor(s)	Distributor Account Number(s)

Signed:



HDP Company Information

Hikvision Dealer Partner Company Information		*Required information
Name:*		
Address Line 1:*		
Address Line 2:*		
City:*		
State:*	ZIP:*	
Phone:*	•	
Company Website:*		
Company Representative Information		*Required information
Name:*		
Email:*		
Phone:*		
Company Main Point of Contact Information		*Required information
Name:*		
Email:*		
Phone:*		
Sales Leader Information		
Name:		
Email:		
Installation Leader Information		
Name:		
Email:		
Operations Leader Information		
Name:		
Email:		
Service Leader Information		
Name:		
Email:		
Additional Comment Contact Information		
Additional Company Contact Information Name:		
Email:		
Ellidii.		
Additional Company Contact Information		
Name:		
Email:		
Liliali.		
Additional Company Contact Information		
Name:		
Fmail:		