**SECTOR: FURNITURE & DESIGN**

|  |  |  |  |
| --- | --- | --- | --- |
| **Company Name** |  | **Contact Person** |  |
| **Address** |  | **Role** |  |
| **City** |  | **Land Line** |  |
| **ZIP code** |  | **Mobile Phone** |  |
| **Province** |  | **Fax number** |  |
| **Website** |  | **Email Address** |  |

1 - Feasibility Study Form

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| You are kindly requested to fill the document properly in Italian or English.  You are kindly requested to attach a company brochure in Italian or English.  You are kindly requested to attached a complete catalogue of your products.  You are kindly requested to attach a company projects portfolio. |

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| --- | --- |
|  | **COMPANY INFORMATION** |
|  | |
| **INDUSTRY**   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  | FURNITURE |  |  | BATHROOM |  |  | KITCHEN | |  |  | Sofas and armchairs |  |  | Bathrooms fixtures |  |  | Kitchen furniture | |  |  | Tables and chairs |  |  | Showers and bathtubs |  |  | Sinks and kitchen taps | |  |  | Storage systems |  |  | Bathroom taps |  |  | Kitchen appliances | |  |  | Sleeping area |  |  | Bathroom furniture |  |  | Cooking accessories | |  |  | Kids furniture |  |  | Bathroom accessories |  |  | Other: | |  |  | Other: |  |  | Other: |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  | OFFICE |  |  | LIGHTING |  |  | OUTDOOR | |  |  | Office desks & meeting tables |  |  | Floor |  |  | Outdoor furniture | |  |  | Executive chairs |  |  | Table |  |  | Swimming Pools | |  |  | Storage units |  |  | Wall ceiling |  |  | Outdoor flooring | |  |  | Office partitions |  |  | Pendant |  |  | Street furniture | |  |  | Other: |  |  | Other: |  |  | Other: | |  |  |  |  |  |  |  |  |  | |  |  | CONTRACT |  |  | FINISHINGS |  |  | WELLNESS | |  |  | Hotel furniture |  |  | Floor covering |  |  | Spa | |  |  | Furnishing for public buildings |  |  | Wall covering |  |  | Swimming pools & eq. | |  |  | Furnishing for shops |  |  | Suspended ceilings |  |  | Gym and fitness | |  |  | Restaurant and cafè furniture |  |  | Doors and windows |  |  | Other: | |  |  | Other: |  |  | Stairs Fireplaces |  |  |  | |  |  |  |  |  | Other: |  |  |  | | |

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| --- | --- | --- | --- |
| Start of Activity (Year): | |  | |
| Workforce (n.): |  | |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| **Turnover (Mln. €)** | **Export Turnover (%)** | **Revenues from Contract (%)** |
| 2015: | 2015: | 2015: |
| 2016: | 2016: | 2016: |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **GEOGRAPHIC AREA** | | | | | |
| **WORLDWIDE AREA**  *Use this section to indicate how your turnover is split* | | | | | | |
|  | | | | | |  |
|  | | **0-15%** | **15-40%** | **40-60%** | **60-100%** |  |
|  | |  |  |  |  |  |
| Italy | |  |  |  |  |  |
| Europe | |  |  |  |  |  |
| Asia | |  |  |  |  |  |
| USA and Canada | |  |  |  |  |  |
| Latin America | |  |  |  |  |  |
| Mediterranean | |  |  |  |  |  |
| Middle East | |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **COUNTRY**  *Use this section to list the key countries where you mainly distribute your products or services* | | |
|  |  |  |
| **Country** | **Country** | **Country** |
| 01: | 05: | 09: |
| 02: | 06: | 10: |
| 03: | 07: | 11: |
| 04: | 08: | 12: |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **DISTRIBUTION** | | | | |  | | | |
| **DISTRIBUTION MODEL**  Use this section to flag the way you usually distribute your products or services | | | | | | | | | |
|  | |  |  |  |  | |  |  |  |
|  | | never | sometime | often |  | | never | sometime | often |
| Branch | |  |  |  | Direct (Contract) | |  |  |  |
| Agent | |  |  |  | Direct (Retail/Cons.) | |  |  |  |
| Sole Importer / Distr. | |  |  |  | Franchising | |  |  |  |
| Multi Distributor | |  |  |  | Joint Venture | |  |  |  |
| Direct Distribution | |  |  |  | Other: | |  |  |  |
|  | |  |  |  |  | |  |  |  |

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| --- | --- | --- |
|  | **COMPETITOR ANALYSIS** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **COMPETITIVENESS OF YOUR COMPANY:**  *Please use this section to flag your added values* | | | |
|  |  |  |  |
| Design |  | Range of Products |  |
| Quality |  | Brand |  |
| Technology |  | Other |  |
| Value for Money |  |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PRICE POSITIONING:**  *To fill this section please consider the global market as a benchmark for your products or services* | | | | | | | | | | | |
| 1 - premium |  | | 2 - |  | 3 - |  | 4 - |  | | 5 – low price |  |
|  | |  | | | |  | | |  | | |
| COMMENTS: | |  | | | |  | | |  | | |
|  | | | | | | | | | | | |

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| **OTHERS**  *Please use this section to give us further information which could be relevant to better understand your business and your strengths (country of production, patents, innovation etc.)* | | | |
|  |  |  |  |
|  | | | |

|  |  |
| --- | --- |
| **MAIN COMPETITORS**  *Please use this section to list your direct competitors* | |
|  |  |
| **Company Name** | **Country** |
|  |  |
| 01: |  |
| 02: |  |
| 03: |  |
| 04: |  |

|  |  |  |
| --- | --- | --- |
| **INDIRECT COMPETITORS**  *Please use this section to list the companies which are not your direct competitors but they represent an alternative to your products or services. They might be cheaper in price, offer different technology for the same utilization, etc.*  *Add a comment to explain the main difference between your offer and theirs* | | |
|  |  |  |
| **Company Name** | **Country** | **Comment** |
|  |  |  |
| 01: |  |  |
| 02: |  |  |
| 03: |  |  |
| 04: |  |  |

2 - Partner Research Form

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| Previous Experience in the local market (if any): |
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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Is your company in contact with local companies?**  *if yes, please specify the name and the address* | | | Yes |  | | No |  |
| **Name** | **Contact Person** | **Telephone Number** | | | **email** | | |
|  |  |  | | |  | | |
|  |  |  | | |  | | |
|  |  |  | | |  | | |
| **Is there any specific company you would like to contact?**  *If yes, please specify the name and the address* | | | Yes |  | | No |  |
| **Name** | **Contact Person** | **Telephone Number** | | | **email** | | |
|  |  |  | | |  | | |
|  |  |  | | |  | | |
|  |  |  | | |  | | |
| **Do you have a dedicated structure for the local market?**  *If yes, please specify how many people are involved* | | | Yes |  | | No |  |
| **Do you have a business plan for the local market?**  *If yes, please specify what kind of investment you foresee* *(production site – logistics – assembling – sales dept.)* | | | Yes |  | | No |  |
| **Are you interested in establishing a branch in the local market?** | | | Yes |  | | No |  |
| **Is there any specific company you want NOT to contact?**  *If yes, please specify the name and the address:* | | | Yes |  | | No |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Contact Person** | **Telephone Number** | **email** |
|  |  |  |  |
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| **Describe briefly the profile of the partner you would like to meet**  *Please use this section to indicate what kind of companies you are looking for, which kind of products/services they produce, brands they currently deal with, etc.* |
|  |
|  |

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| --- |
| **If your target partner is an importer/distributor, please mention which other products they usually sell together with yours (IMPORTANT)**  *This section is meant to support the scouting activity, to identify potential partners they might be interested in enlarging their product portfolio, having the necessary business structure and commercial channel* |
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| **Describe briefly the profile of the partner you would like to meet (only for Contract oriented companies)**  *Please use this section to indicate what kind of companies you would like to meet to explore contract (direct supply) opportunities* |
|  |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **TRAINING – SEMINARS – WORKSHOPS** | |  | | | |
| **Training:** **are you interested in performing training sessions to potential customers, professionals or influencers, in order to offer a better understanding of your products/services so to improve your business opportunities?** | Yes | |  | No |  |

|  |
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| *If you answered yes to the previous questions, please explain the way a training session should be structured and to whom it should be addressed* |
|  |
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| **PROFILING REQUIREMENTS**  Please note that turnover data, manpower, purchase value might be challenging information to be collected |
| **Please list the key information you need in order to allow a proper evaluation about the local counterparts (IMPORTANT)**  *This section will help the trade analyst to gather the proper information from the target market.* |

|  |  |  |  |
| --- | --- | --- | --- |
| Years of experience |  | Factory Info |  |
| Main activity/field |  | Production info |  |
| Export/Import capability |  | License |  |
| Territory Coverage |  | After Sales team |  |
| Distribution Channel |  | Looking for industrial partnership |  |
| Brands distributed |  | Projects per year |  |
| “Made in” of the brands distributed |  | Other: |  |
| Show-room |  | Other: |  |
| Client typology |  | Other: |  |
| Project typology |  | Other: |  |
| Project history |  | Other: |  |
|  |  |  |  |