



Aravind Eye Hospital. LAICO Building 72,K.K Salai. Madurai - 625 020, India.
Ph: +91-452-2535573/2537530, FAX: +91-452-2535274, e-mail: [aurolab@aurolab.com](mailto:auroLab@aurolab.com)

Distributor Registration form

Your Company Information

*Name of Company: _____

Country: _____

President/CEO/Owner: _____

*Email: _____

*Principal Contact: _____

Website: _____

Address: _____

*Phone: _____

Fax: _____

Cell: _____

* Denotes required fields.

Company Background/Capacity

1. Which territories does your company cover?

2. How many years has your company sold?

Medical Products:

Ophthalmic Products:

3. Is it necessary to register/certify medical devices or ophthalmic products in your country? **Yes / No**

If Yes:

Has your company ever registered medical devices before? **Yes / No**

How long does the registration process take?

Are you aware of the fees associated with registration?

If Yes, what is the calculated fee:\$

Does your country honor CE or ISO 9001 Certifications? **Yes / No**

4. How many sales representatives do you have?

Total employees:

5. Does your company currently sell any of the following ophthalmic products? **Yes / No**

	Brand/Type	End User Price
PMMA IOL	_____	_____
Single Piece Acrylic IOL	_____	_____
Three Piece Acrylic IOL	_____	_____
Single Use Instruments	_____	_____
Blades	_____	_____
Stainless Instruments	_____	_____
Viscoelastic Solutions	_____	_____
A Scans	_____	_____
Phaco Equipment	_____	_____

6. What was your total company sales volume last year?In \$USD:

7. What was your total ophthalmic sales volume last year?In \$USD:

Estimated Monthly Volumes for Aurolab’s Products

Pieces

PMMA IOL _____

Single Piece Acrylic IOL _____

Three Piece Acrylic IOL _____

Viscoelastic Solutions: (choose below)

1% Sodium Hyaluronate _____

1.4% Sodium Hyaluronate (High Viscosity) _____

1.8% Sodium Hyaluronate (Bacteria Fermented) _____

2.5% Sodium Hyaluronate (Viscoadaptive) _____

2% Methyl Cellulose _____

2% Methyl Cellulose & 2% Chondroitin Sulfate _____

2% Sodium Hyaluronate & 2% Chondroitin Sulfate. _____

Tension Rings _____

Sutures: (choose below)

Nylon _____

Silk _____

Polypropelene _____

Polyester _____

PGA (Poliglicolic Acid) _____

Plastic Injectors _____

Titanium Injectors _____

Tripan Blue _____

Drapes _____

Single Use Instruments _____

Blades _____

Phaco Equipment _____

Scan A Equipment _____

Company References (Preferably US Companies)

- 1.
- 2.
- 3.

Additional Information - Provide any additional information you feel may be needed for your application.