

Preferred Distributor Nomination Form for Dell EMC Storage Solutions

Dear Solution Provider,

Thank you for expressing your interest in purchasing products from the Dell EMC Storage solutions portfolio. We kindly request you to nominate a Distributor who supports Dell EMC Storage solutions by filling out the request form below and attaching it to the Case created in your Portal.

General Solution Provider Information & Request Form

My company is currently a Dell Technologies Solution Provider buying through Distribution and is interested in selecting a Preferred Distributor for Dell EMC Storage Solutions. I understand the information provided in this document will be reviewed by authorized Dell Technologies or Distributor personnel only and will be maintained in confidence. I also understand that by completing and submitting this form to Dell Technologies I will be held to a period of at least ONE (1) year with my Preferred Distributor named below pursuant to the terms of the Dell Technologies Switch Policy.

Solution Provider's Full				Dell Assigned		
Legal Business Name:				Affinity ID #		
Solution Pr	ovider's Address:					
City:			State:	Zip:		
Country:		Phone:		Corporate URL	Corporate URL:	
If applicable, what is the name of your Current Dell Preferred Storage Distributor:						
Which Dell Technologies Distributor are you Nominating and planning to use in procuring Dell EMC Storage Solutions going forward?				0		
Reasons for this request (Summary of Supporting Business Case):						
Requestor Name:		Requestor Title:		Request eMail:	or	
Date:		Signature:				