



**Pacific Microsonics, Inc.**  
**HDCD® OEM License Application**

<b>General</b>	Corporate	Manufacturing
Name		
Address 1		
Address 2		
City		
State		
Zip		
Country		
Phone		
Fax		

**Marketing/Technical:** Planned HDCD® Products

Model Name/No.	1.	2.
Digital Format	<input type="checkbox"/> CD <input type="checkbox"/> DVD <input type="checkbox"/> MiniDisc <input type="checkbox"/> A/V Receiver <input type="checkbox"/> CD/MD <input type="checkbox"/> DAC <input type="checkbox"/> Other _____	<input type="checkbox"/> CD <input type="checkbox"/> DVD <input type="checkbox"/> MiniDisc <input type="checkbox"/> A/V Receiver <input type="checkbox"/> CD/MD <input type="checkbox"/> DAC <input type="checkbox"/> Other _____
Equipment Type	<input type="checkbox"/> Separate <input type="checkbox"/> Mini Comp <input type="checkbox"/> Rack <input type="checkbox"/> Portable <input type="checkbox"/> Auto <input type="checkbox"/> Other _____	<input type="checkbox"/> Separate <input type="checkbox"/> Mini Comp <input type="checkbox"/> Rack <input type="checkbox"/> Portable <input type="checkbox"/> Auto <input type="checkbox"/> Other _____
HDCD Implementation	<input type="checkbox"/> PMD-100 <input type="checkbox"/> PCM 1732 <input type="checkbox"/> MC 56362 <input type="checkbox"/> SHARC <input type="checkbox"/> Other _____	<input type="checkbox"/> PMD-100 <input type="checkbox"/> PCM 1732 <input type="checkbox"/> MC 56362 <input type="checkbox"/> SHARC <input type="checkbox"/> Other _____
MSRP/Unit (US\$)	<input type="checkbox"/> <150 <input type="checkbox"/> 150-299 <input type="checkbox"/> 300-499 <input type="checkbox"/> >\$500	<input type="checkbox"/> <150 <input type="checkbox"/> 150-299 <input type="checkbox"/> 300-499 <input type="checkbox"/> >\$500
Volume/Year (Units)	<input type="checkbox"/> <5,000 <input type="checkbox"/> 5,001-50,000 <input type="checkbox"/> 50,001-200,000 <input type="checkbox"/> > 200,001-500,000 <input type="checkbox"/> >500,000 (amt _____)	<input type="checkbox"/> <5,000 <input type="checkbox"/> 5,001-50,000 <input type="checkbox"/> 50,001-200,000 <input type="checkbox"/> > 200,001-500,000 <input type="checkbox"/> >500,000 (amt _____)

Model Name/No.	3.	4.
Digital Format	<input type="checkbox"/> CD <input type="checkbox"/> DVD <input type="checkbox"/> MiniDisc <input type="checkbox"/> A/V Receiver <input type="checkbox"/> CD/MD <input type="checkbox"/> DAC <input type="checkbox"/> Other _____	<input type="checkbox"/> CD <input type="checkbox"/> DVD <input type="checkbox"/> MiniDisc <input type="checkbox"/> A/V Receiver <input type="checkbox"/> CD/MD <input type="checkbox"/> DAC <input type="checkbox"/> Other _____
Equipment Type	<input type="checkbox"/> Separate <input type="checkbox"/> Mini Comp <input type="checkbox"/> Rack <input type="checkbox"/> Portable <input type="checkbox"/> Auto <input type="checkbox"/> Other _____	<input type="checkbox"/> Separate <input type="checkbox"/> Mini Comp <input type="checkbox"/> Rack <input type="checkbox"/> Portable <input type="checkbox"/> Auto <input type="checkbox"/> Other _____
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MSRP (US\$)	<input type="checkbox"/> <150 <input type="checkbox"/> 150-299 <input type="checkbox"/> 300-499 <input type="checkbox"/> >\$500	<input type="checkbox"/> <150 <input type="checkbox"/> 150-299 <input type="checkbox"/> 300-499 <input type="checkbox"/> >\$500
Volume/Year (Units)	<input type="checkbox"/> <5,000 <input type="checkbox"/> 5,001-50,000 <input type="checkbox"/> 50,001-200,000 <input type="checkbox"/> > 200,001-500,000 <input type="checkbox"/> >500,000 (amt _____)	<input type="checkbox"/> <5,000 <input type="checkbox"/> 5,001-50,000 <input type="checkbox"/> 50,001-200,000 <input type="checkbox"/> > 200,001-500,000 <input type="checkbox"/> >500,000 (amt _____)

<b>Contacts:</b>	Product Planning	Design/Engineering	Manufacturing
<b>Primary</b>			
Location	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg
Direct Phone			
Direct Fax			
E-Mail Address			
<b>Alternate</b>			
Location	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg
Direct Phone			
Direct Fax			
E-Mail Address			

**Pacific Microsonics, Inc.**  
 32990 Alvarado Niles Road Suite 910 Union City, Ca 94587 Tel: 510-475-8000 Fax: 510-475-8005 Website: www.hdc.com



**Pacific Microsonics, Inc.**  
**HDCD® OEM License Application**

**Financial** Billing Address

Address 1		Entity Type	<input type="checkbox"/> Corp.	<input type="checkbox"/> Ltd.	<input type="checkbox"/> Partnership	<input type="checkbox"/> Other _____
Address 2		State/Country of Registration	State: _____	Country: _____		
City		Date Established	_____			
State		Annual Sales	US\$	_____		
Zip		Bank				
Country		Contact				
Phone		Phone				
Fax		Account Number				

**Contacts:**

Contracts/Purchasing                      Accounts Payable                      Accounts Receivable

**Primary**

Location	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg <input type="checkbox"/> Billing	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg <input type="checkbox"/> Billing	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg <input type="checkbox"/> Billing
Direct Phone			
Direct Fax			
E-Mail Address			

**Alternate**

Location	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg <input type="checkbox"/> Billing	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg <input type="checkbox"/> Billing	<input type="checkbox"/> Corp <input type="checkbox"/> Mfg <input type="checkbox"/> Billing
Direct Phone			
Direct Fax			
E-Mail Address			

**Trade Credit**

Reference 1                                      Reference 2                                      Reference 3

**References:**

Company			
Address 1			
Address 2			
City			
State			
Zip			
Country			
Phone			
Product/Service			
Credit Limit (\$US)			

Desired International Payment Method       Prepay     LOC