



KITCHEN BRAINS®

Driven by **(FAST)** Networked by **SCK®**

905 Honeyspot Road, Stratford CT 06615-7147

PHONE: +203-377-4414 FAX: +203-377-8187

www.kitchenbrains.com

Kitchen Brains® Smart Commercial Kitchen® (SCK®) Partnership Program Business Case Application

Thank you for your interest in joining the Kitchen Brains SCK Partner Program. Kitchen Brains is unique in its ability to bring together various aspects of a modern food service establishment by focusing on the heart of the business, the kitchen. Assimilating information from previously disparate systems and appliances, our Kitchen Brains suite of products and applications deliver solutions independently or collectively to Food Service Operators (FSOs) in the areas of Food Quality and Availability, Food Safety, Labor Productivity, Asset Management, Energy Management, Asset Utilization and more.

This business case provides a structured approach for resellers, third party companies, and ultimately our mutual clients to obtain additional capabilities and breadth of functionality under the Kitchen Brains SCK solutions suites.

Kitchen Brains actively seeks partnerships with companies who can:

- Enable the delivery of incremental value to our clients through with synergies not currently available in the Kitchen Brains offerings,
- Extend the Kitchen Brains offerings and accessibility to clients,
- Ultimately deliver greater value to our clients.

This business case application process will help Kitchen Brains determine the appropriate relationship between our organizations and products, and provide additional details about your company. Please complete the application document in its entirety and submit your application to Mark Graham at mgraham@kitchenbrains.com or call 203-380-3448 with questions.

Each applicant is carefully reviewed individually in the order the request was received. As part of the decision process a product demonstration (to validate the technical aspects of the application/integration) may be requested.

Thank you for interest in partnering with Kitchen Brains.

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Date:	
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Company Contact Information

Company Name:			
Street Address:			
City:		State:	
Postal Code:		Country:	
Website:			

Primary Contact Name:			
Title:			
Phone:			
Fax:			
Email:			
Mailing Address:			
City:		State:	
Postal Code:		Country:	

Alternate Contact Name:			
Title:			
Phone:			
Fax:			
Email:			
Mailing Address:			
City:		State:	
Postal Code:		Country:	

About Your Company

Briefly describe the core business of your company/organization and include what types of products and/or services that are offered. Provide any information that would aid us in our evaluation process (250 word limit).

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Year Company was established:	
Number of people employed by your company:	
Number of people in your development group:	
Number of people in your support group:	
Public/Private/Partnership/Sole Proprietorship/Other:	
Latest reported revenues:	
Number of customers represented by revenue:	
% Sales North America:	
% Sales International:	
% Sales direct (vs. Indirect via a channel):	
Install base of your product (e.g. units sold, # of installations, customers served):	
Key business partners:	
Industries serviced:	
Describe your company's management structure (attach an organization chart if possible):	
Primary competitors:	
What Kitchen Brains competitors do you currently partner with? Describe the extent of your relationship and current non-confidential activity. Please be sure to note relationships already formally established similar to the one you are seeking now:	



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Description of Products and Services

Briefly describe the product and/or service that will interact with Kitchen Brains SCK products, services, and/or customers. Provide any information that would be beneficial for our evaluation process (250 word limit).

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How will / does your product interface or interact with Kitchen Brains?	
Describe how your product is priced. Include as much detail as possible including pricing structure, discount structures, distribution pricing, quantity discounts, etc.	
Describe the levels of support you provide for your customers. Please differentiate between support for your solution and the support for interfaces you develop.	
Describe your implementation process.	



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Technical Summary

Name of Product / Application:	
Version:	
Please indicate the current availability of the product / application:	
Is this product / application available for resale or is it a custom application?	
Indicate when this product / application was (will be) released:	
Indicate the number of customers who use this product / application:	
Your product / application's primary client / firmware OS is:	
Your product / application's primary server OS is:	

Please outline any technical advantages pertaining to your product/application that should be considered: Architecture, design, development methodology, user interface, interoperability, integration, legacy application extension, ease of deployment, manageability, flexibility, etc. (250 word limit).

Is this an integration that your development team will build or do you outsource development?	
<i>If this will be done in house please answer the following questions.</i>	
What is your prior experience and background with communication development?	
What primary language do you use for developing (please list embedded/PC/Web separately)?	
How familiar are you with Kitchen Brains technology?	
What is your current level of business engagement with Kitchen Brains or its clients?	

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Clients and References

Please attach additional sheets if required

Current Customers:

Company	Contact Name	Phone Number	Email Address

Pending Customers:

Company	Contact Name	Phone Number	Email Address

Resellers:

Company	Contact Name	Phone Number	Email Address

References: Please list at least three business and/or customer references who we may contact regarding your company and its products/services:

Company	Contact Name	Phone Number	Email Address

Application E-Signature Confirmation

Please complete the fields below recognizing that the information provided in this application is accurate and complete.

Company Name:	
Date Submitted:	

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