**Application Form for Authorization to Use Name/Material/Logos**

Please forward a completed copy of this form together with the required supporting information to iot.marketing@milesight.com

Milesight may require additional information prior to making a determination.

Milesight may refuse to allow a proposed use, require modifications to any proposed use, or require discontinuation of any proposed use.

1. **Requesting Entity**

|  |  |
| --- | --- |
| Company Name |  |
| Address |  |
| Country/Region |  |
| Company URL |  |

1. **Requesting Items (check all that apply)**

\_\_\_\_ Milesight Logo

\_\_\_\_ Milesight Product Image

1. **Proposed Use (check all that apply)**

\_\_\_\_ Product

\_\_\_\_ Event (Name/Date/Location)

\_\_\_\_ Printed Materials

\_\_\_\_ Company website/page (URL) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_ Other (explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Proposed Use Date**

Date you want to **Begin** use of the logo and/or mark: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date when will you **End** use of the logo and/or mark: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Submission and Contact Information**

You confirm that you have authority to act on behalf of the company identified above and that the statements contained herein are true.

|  |  |
| --- | --- |
| Name |  |
| Title |  |
| Work Email |  |
| Phone |  |

Signature:

Date: