

## South Carolina Trade Mission



Trade Mission: Nov. 13-18, 2016  
Deadline to Register: August 31, 2016

The South Carolina Department of Commerce is leading a trade mission to India. Companies that are approved to attend will have one-on-one meetings with prospective distributors, agents and partners that are set by the U.S. Department of Commerce. The trade mission is open to all South Carolina companies.

### Locations:

Chennai, India — November 13-14  
Bangalore or Delhi, India — November 15-16  
Mumbai, India — November 17-18

**Costs** \$1,250\* per stop, additional  
\*Does not include airfare, lodging or meals.

Financial incentives are available for qualified SME's through the S.C. Export Incentives Program. Limited to two company representatives.

### Logistics

Delegates will be responsible for arranging, confirming and payment for their own International flights, as well as, submitting relevant visa applications for India. The Department of Commerce will make the hotel room block reservations, and offer transportation options between the three cities.

To register visit: [SCcommerce.com](http://SCcommerce.com)

## India at a Glance

As one of the state's most strategic partners, South Carolina currently trades \$380 million in exports to India.

These sectors present the best opportunities for U.S. entrants to the Indian market:

- Agribusiness/Forestry
- Civil Aviation
- Defense
- Education Services
- Environment and Water
- Healthcare and Medical Equipment
- Infrastructure
- Mining and Mineral Processing Equipment
- Power and Renewable Energy

For more information contact: Anita Patel, 803-737-0247 or [apatel@SCcommerce.com](mailto:apatel@SCcommerce.com)



# India Trade Mission 2016 Gold Key Matching Service Questionnaire



*In order for us to assist you in meeting your export goals, please complete our Gold Key Matching Service questionnaire. Our U.S. Embassy or Consulate Staff will use the questionnaire to identify and select companies that can meet your specific needs.*

Gold Key Matching Service is requested for the following country: **India: Chennai, Bangalore or Delhi and Mumbai.**

### A. CONTACT INFORMATION

Company Name:		
Address:		
City:	State: SC	Zip Code:
Company Web Site:		
Contact Person:		Title:
Contact Tel:		Contact Fax:
Contact E-mail:		
Alternate Contact:		Title:
Alternate Contact E-mail:		Alternate Contact Tel:

### B. COMPANY INFORMATION

Company Activity: (select all that apply)	
<input type="checkbox"/> Manufacturer <input type="checkbox"/> Exclusive distributor <input type="checkbox"/> Export Management Company	<input type="checkbox"/> Service Company <input type="checkbox"/> Franchisor <input type="checkbox"/> Other (please specify): _____
Has your firm ever used the Gold Key Matching Service? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>	
When?	Where?
Are you currently working with a U.S. Export Assistance Center (USEAC)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please provide USEAC City and Trade Specialist name:	

### C. PRODUCT/SERVICE INFORMATION

Export Control Classification Number (ECCN):	
HS Code:	Does your product contain at least 51% U.S. content? <input type="checkbox"/> Yes <input type="checkbox"/> No
Describe the product/service(s) you seek to promote, including its competitive advantages and unique selling proposition. Include its applications and unique features that differentiate your product from that of the competition.	

Who are your major competitors at home and abroad?
List the most important end-users or end-user industries for this product/service.
How is your product typically distributed and marketed in the United States (and in other countries if applicable)?
What type of licensing or registration does it require in the U.S.?
What related products might an agent/distributor of this product also handle?

**D. BUSINESS OBJECTIVES**

<p>What type of business contacts are you seeking?</p> <table> <tr> <td><input type="checkbox"/> Distributor / Wholesaler</td> <td><input type="checkbox"/> Joint Venture Partner or Licensee</td> </tr> <tr> <td><input type="checkbox"/> Agent / Sales Representative</td> <td><input type="checkbox"/> Direct sales</td> </tr> <tr> <td><input type="checkbox"/> Franchisee</td> <td><input type="checkbox"/> Other: _____</td> </tr> </table>	<input type="checkbox"/> Distributor / Wholesaler	<input type="checkbox"/> Joint Venture Partner or Licensee	<input type="checkbox"/> Agent / Sales Representative	<input type="checkbox"/> Direct sales	<input type="checkbox"/> Franchisee	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Distributor / Wholesaler	<input type="checkbox"/> Joint Venture Partner or Licensee					
<input type="checkbox"/> Agent / Sales Representative	<input type="checkbox"/> Direct sales					
<input type="checkbox"/> Franchisee	<input type="checkbox"/> Other: _____					
Is your firm seeking representation on an exclusive basis in this market? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Describe any preferences, requirements, or pre-qualifications that the ideal prospect must have, such as English language ability, size, revenue, coverage, client base, investment etc.						
Describe any special features of your company's operations, interests, or objectives in the target market that can help us identify potential business partners.						
Are there any specific companies, or types of companies, you would like us to contact? If so, please name them.						

Are there any specific companies, or types of companies, you would NOT like us to contact?  
If so, please name them.

Is your company currently represented in this country or region?  Yes  No  
If yes, is your distributor aware you are seeking additional representation?  Yes  No

**E. GOLD KEY MATCHING SERVICE INFORMATION**

Desired Gold Key Dates:	Alternative Dates:
Desired Locations:	
What type of logistical support will you require? (Select all that apply)	
<input type="checkbox"/> Hotel <input type="checkbox"/> Ground transportation <input type="checkbox"/> Interpreter <input type="checkbox"/> Other (specify): _____	

To complete your application for a Gold Key Matching Service, *please submit the following materials at least 6 weeks before the desired Gold Key dates:*

- Completed Gold Key Matching Service Questionnaire
- Company Introduction Letter on your company letterhead
- Payment
- A minimum of 15 sets (per day of Gold Key) of your company brochure
- Signed Participation Agreement

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*Official USFCS Use Only*

PA #: \_\_\_\_\_ SECTOR: \_\_\_\_\_  
 Commercial Specialist: \_\_\_\_\_  
 CLIENT USEAC: \_\_\_\_\_