

2021 NATS Vendor Proposal



Vendor Name: _____ **Main Contact:** _____
Program Date: _____ **Phone:** _____ **Fax:** _____
Product Line: _____ **E-mail:** _____
Phone: _____ **Fax:** _____ **Second Contact:** _____
Vendor Address: _____ **Phone:** _____ **Fax:** _____
City/State/Zip: _____ **E-mail:** _____
Website: _____ **Accounts Payable Contact:** _____
Main Contact Address: _____ **Phone:** _____ **Fax:** _____
City/State/Zip: _____ **E-mail:** _____

1) **FREIGHT PREPAID POLICY:** _____ lbs (or) _____ Dollars
Drop Shipments: NO YES If YES, any minimum, or charge? _____
Minimum Order: Tools: _____ Parts: _____
Handling Fee: _____

2) **PAYMENT TERMS:** _____ Extended Dating? YES NO
(NET, DAYS, AND/OR PROX) (SEE BELOW)

VOLUME ORDER DISCOUNTS OR EXTENDED DATING: Example: (\$5,000+ = 2%, 30-60-90)

3) PUBLISHED STANDARD DISCOUNTS:

**** ALL NATS PRICE SHEETS MUST BE IN EXCEL FORMAT WITH AN ASSIGNED "NATS PRICE" COLUMN ****

List To Dealer: _____ Details: _____
User To Jobber: _____
Jobber To W/D: _____

4) **PRICE CHANGES:** Effective Date Of Current Group Pricing: _____
Advance Notification Of Price Changes: 60 Days 90 Days 120 Days

6) **OTHER GROUP DISCOUNTS:**

Ongoing: _____

7) **WARRANTY POLICY:**

Period Of Time: _____
Reimbursement: _____
Procedure: _____

Credit Policy: _____

8) **STOCK ADJUSTMENT:**

% Of Sales: _____ Offset Order: _____ Handling Fee: _____

****THESE FUNDS ARE TO BE PAID DIRECTLY FROM THE VENDOR TO MEMBER****

9) **MARKET DEVELOPMENT FUNDS:** (ie. Trade Shows, Marketing Materials, etc.)

MDF Funds: YES NO

Details: _____

10) **INDIVIDUAL MEMBER CO-OP/ADVERTISING ALLOWANCE:** (ie. Individual Catalogs/Flyers)

W/D Program _____ % Of Accrual Based On: _____

Explain Advertising Program:

What Is The Claim Procedure? Please explain: _____

11) **GROUP REBATE:** ****REBATES PAID TO NATS HEADQUARTERS AND ARE DISTRIBUTED TO NATS MEMBERS****

An annual rebate can be earned on the group's annual net purchases or % of growth. Please fill in details below.

ANNUAL PURCHASES OR % OF GROWTH	% OF REBATE
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

12) **INDIVIDUAL REBATE:** ****PAID TO:** NATS HQ FOR DISTRIBUTION DIRECTLY BY VENDOR TO MEMBER

Individual member rebate can be earned on growth over the previous year. Please fill in details below.

% OF GROWTH	% OF REBATE
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

13) **VENDOR PROGRAM NOTES:**

14) **NATS QUARTERLY FLYER PROGRAM:**

This program is a unique sales tool to help NATS members advertise select manufacturers and their product line. Flyer items are selected and agreed upon the members and manufacturers. We encourage all participating vendors to offer special pricing on new or popular items to help drive sales. To view a sample flyer, please contact Michelle.

Are you interested in participating in this flyer? YES NO
Flyer Ad Fee; \$650.00 for a full page ad or \$350.00 for a half page ad

Have a unique idea for a promotion?

NATS members are always interested in closeouts or group buys on select items, and group volume purchases. Interested in a four or eight page flyer dedicated strictly to your product line?
Feel free to call or email us to discuss these opportunities further.

15) **HEADQUARTERS ALLOWANCE:** (% or \$ Amount) _____

Paid: Quarterly (preferred) Annually

This fee helps NATS headquarters operate and enables us to administer your program efficiently.

Upon submitting this form, please enclose all relative program information and send to michelle@natsonline.org or sandor@natsonline.org. All participating vendors' agree to notify NATS headquarters of current price sheets, price updates, quarterly sales figures, promotions, new products, terms and conditions, warranty, and policies.

**This proposal shall become a legal contract when signed and accepted by both the vendor and an authorized NATS representative. This contract will remain in effect for the calendar year listed on the top of page one. Any changes or revisions must be accepted and approved by both parties and confirmed with a new proposal form.

Factory Authorized Representative

Date

NATS Authorized Representative

Date

WE VALUE YOUR PARTNERSHIP

