GARMIN

Authorized Reseller Application

Thank you for your interest in becoming a Garmin Authorized Reseller. Pending authorization, we will send you the Authorized Reseller Logo and notify our Distributors of your status on the following Monday. Please fill in the blue sections and the additional Store Locations if applicable. Fields marked with an * are required.

Please complete this application and email a signed PDF (or digitally signed) copy to: reseller@garmin.com

***Company Name:**					
***Physical Address:**					
***City:**		***State:**		***Zip Code:**	
***Business Tax ID #:**		Federal or State Tax ID accepted.			

Mark "Same" if the billing address is the same as physical address; if not, please include billing address

***Billing Address:**					
City:		**State:**		**Zip Code:**	

***Contact Name:**		**Title:**	
***E-mail Address:**			
***Phone:**		**Fax:**	

***1. Please mark with an "X" next to the Garmin product lines that you wish to resell:**

Automotive		Motorcycle		Marine		Outdoor	
Running/Cycling		Golf		Dog		Archery	
Dive Watches		Other					

2. Please list any other company names under which you sell or operate:

Name(s):

Name(s):

3. Please list any other store locations on the second tab of this spreadsheet below (Additional Store Locations)

***4. Please mark with an "X" next to all categories that describe how you intend to resell Garmin products:**

B&M Retail Store		Internet		Other		Please explain below

Please list your company's website. And if you plan on selling via the Internet, please list all e-commerce websites for which you are asking for approval (no eBay or Amazon third party allowed):

Website/URL(s):

Website/URL(s):

^Other:

***5. Please list any Distributor(s) that you purchase or intend to purchase Garmin products from:**

Name(s):

Name(s):

6. Please list any Third Party Platforms that you currently sell products on:

Name(s):

Name(s):

***7. Are you aware that Garmin does not authorize dealers or resellers to sell via internet auctions?** (Mark answer with "X")

Yes		No	

Internet Sales and Auction Policies are available from your current Garmin Authorized Distributor

By submitting this application, you certify that you have received, read and understand the Garmin Authorized Reseller Policy and that the information supplied in this application is true and correct. The parties agree to accept a digital image of this signed document as executed, as a true and correct original and admissible as best evidence to the extent permitted by a court with proper jurisdiction. You further agree that your signature below may appear digitally and is the legally binding equivalent of a traditional handwritten signature.

Signature of Applicant (email is considered electronic signature)

Date

FRM-0120
Rev K

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Additional Store Locations

Store Name / Number:			
Physical Address:			
City:		State:	Zip Code:
Phone:		Fax:	

Store Name / Number:			
Physical Address:			
City:		State:	Zip Code:
Phone:		Fax:	

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Phone:		Fax:	